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ABSTRACT

To assess the status of hunger and homelessness in U.S. cities during the year 2000, the U.S. Conference of Mayors surveyed 25 major cities whose mayors were members of its Task Force on Hunger and Homelessness. The survey sought information and estimates from each city on emergency food supplies and services, the causes of hunger and homelessness, exemplary programs to address these problems, the availability of affordable housing, and the outlook for the future. Officials in the surveyed cities estimate that during the past year requests for emergency food assistance increased by an average of 17%, with 83% of the cities registering an increase. Sixty-two percent of the people requesting emergency food assistance were members of families. Low-paying jobs led the list of identified causes of hunger. Requests for emergency shelter also increased in 76% of the survey cities. Lack of affordable housing led the list of causes of homelessness identified by city officials. Requests for assisted housing increased in 68% of the cities during the year, but applicants had to wait an average of 16 months for public housing. Officials in 71% of the responding cities expected requests for emergency food assistance to increase, and in 72% of the cities, officials expected requests for emergency housing to increase. City officials continued to have mixed views with respect to the effect the current strong economy is having on problems of hunger and homelessness. Many believe that the strong economy will lead to improved conditions, but others say that the strong economy has made things worse by increasing housing costs. Appendixes contain charts of hunger and homelessness and population survey data, the survey questionnaire, and a list of the survey cities and their mayors. (SLD)

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A Status Report on

Hunger and Homelessness

in America's Cities

2000

A 25-City Survey
December 2000

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The United States Conference of Mayors

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J. Thomas Cochran, Executive Director

The report was prepared by Eugene T. Lowe, Assistant Executive Director, with the assistance of Art Slater, James Welfley, Doreen Hardie of the staff of the U.S. Conference of Mayors and Alissa Cristina Hernandez (Intern.) A copy may be obtained from the USCM website at http://www.usmayors.org

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Summary

To assess the status of hunger and homelessness in America's cities during 2000 The U.S. Conference of Mayors surveyed 25 major cities whose mayors were members of its Task Force on Hunger and Homelessness. The survey sought information and estimates from each city on 1) the demand for emergency food assistance and emergency shelter and the capacity of local agencies to meet that demand; 2) the causes of hunger and homelessness and the demographics of the populations experiencing these problems; 3) exemplary programs or efforts in the cities to respond to hunger and homelessness; 4) the availability of affordable housing for low income people; 5) the outlook for the future and the impact of the economy on hunger and homelessness.

Among the findings of the 25-city survey:

HUNGER

- Officials in the survey cities estimate that during the past year requests for emergency food assistance increased by an average of 17 percent, with 83 percent of the cities registering an increase. Requests for food assistance by families with children increased by an average of 16 percent. Requests for emergency food assistance by elderly persons increased by an average nine percent during the last year, with 75 percent of the cities reporting an increase.

- On average, 13 percent of the requests for emergency food assistance are estimated to have gone unmet during the last year. For families alone, 13 percent of the requests for assistance are estimated to have gone unmet. In 46 percent of the cities, emergency food assistance facilities may have to turn away people in need due to lack of resources.

- Sixty-two percent of the people requesting emergency food assistance were members of families -- children and their parents. Thirty-two percent of the adults requesting food assistance were employed.

- The overall level of resources available to emergency food assistance facilities increased by 16 percent during the last year. Fifty-two percent of the survey cities reported that emergency food assistance facilities are able to provide an adequate quantity of food. In 76 percent of the cities emergency food assistance facilities have had to decrease the number of bags of food provided and/or the number of times people can receive food. Of these cities, 24 percent have had to increase the limit on food provided. Fifty-two percent of the survey cities reported that the food provided is nutritionally balanced.

- In 100 percent of the cities, emergency food assistance facilities were relied on by

families and individuals both in emergencies and as a steady source of food over long periods of time.

- Low-paying jobs lead the list of causes of hunger identified by the city officials. Other causes cited, in order of frequency, include high housing costs, unemployment and other employment-related problems, poverty or lack of income, substance abuse, and food stamp cuts, utility costs, the costs and unavailability of transportation and welfare reform.

HOMELESSNESS

- During the past year requests for emergency shelter increased in the survey cities by an average of 15 percent, with 76 percent of the cities registering an increase. Requests for shelter by homeless families alone increased by 17 percent, with 72 percent of the cities reporting an increase.

- An average of 23 percent of the requests for emergency shelter by homeless people overall and 27 percent of the requests by homeless families alone are estimated to have gone unmet during the last year. In 68 percent of the cities, emergency shelters may have to turn away homeless families due to lack of resources; in 56 percent they may also have to turn away other homeless people.

- People remain homeless an average of 5 months in the survey cities. Fifty percent of the cities said that the length of time people are homeless increased during the last year.

- Lack of affordable housing leads the list of causes of homelessness identified by the city officials. Other causes cited, in order of frequency, include low paying jobs, substance abuse and the lack of needed services, mental illness and the lack of needed services, domestic violence, poverty, and changes and cuts in public assistance.

- Officials estimate that, on average, single men comprise 44 percent of the homeless population, families with children 36 percent, single women 13 percent and unaccompanied minors seven percent. The homeless population is estimated to be 50 percent African-American, 35 percent white, 12 percent Hispanic, 2 percent Native American and one percent Asian. An average of 22 percent of homeless people in the cities are considered mentally ill; 37 percent are substance abusers; 26 percent are employed; and 15 percent are veterans.

- In 52 percent of the cities, families may have to break up in order to be sheltered. In 44 percent of the cities families may have to spend their daytime hours outside of the shelter they use at night.

- Officials in the survey cities report that the Federal Government's Continuum of Care

policy has made a difference in their community's effort to address homelessness, and that the increase in HUD funding to address homelessness has resulted in more homeless families and individuals accessing transitional and permanent housing and reaching self-sufficiency in their cities.

HOUSING

- Requests for assisted housing by low- income families and individuals increased in 68 percent of the cities during the last year. Twenty-nine percent of eligible low- income households are currently served by assisted housing programs. City officials estimate that low- income households spend an average of 51 percent of their income on housing.

- Applicants must wait an average of 16 months for public housing in the survey cities. The wait for Section 8 Certificates is 23 months, for Section 8 Vouchers, 29 months. Forty percent of the cities have stopped accepting applications for at least one assisted housing program due to the excessive length of the waiting list.

THE OUTLOOK

- Officials in 71 percent of the responding cities expect requests for emergency food assistance to increase during 2000. Sixty-five percent expect that requests for emergency food assistance by families with children will increase during 2001. Officials in 72 percent of the cities expect that requests for emergency shelter will increase next year. Seventy-nine percent expect that requests by homeless families will increase.

- City officials reports continue to have mixed views with respect to the effect that the current strong economy is having on problems of both hunger and homelessness. According to some, there is little or no impact, but for others a strong economy leads to improved conditions. Many believe, however, that the strong economy will lead to improved conditions. Still others say that the strong economy has made things worse, especially with respect to increased housing costs which leads to a lack of affordable housing.

Introduction

In October 1982, The U.S. Conference of Mayors and The U.S. Conference of City Human Services Officials brought the shortage of emergency services -- food, shelter, medical care, income assistance, energy assistance – to national attention through a 55-city survey. That survey showed that the demand for emergency services had increased in cities across the nation, and that on average only 43 percent of that demand was being met.

Since that time the Conference has done numerous reports on hunger, homelessness and poverty in cities. These reports have documented the causes and the magnitude of the problems, how cities were responding to them and what national responses were required. They include:

- Hunger in American Cities, June, 1983
- Responses to Urban Hunger, October, 1983
- Status Report: Emergency Food. Shelter and Energy Programs in 20 Cities, January, 1984
- Homelessness in America' Cities: Ten Case Studies, June, 1984
- Housing Needs and Conditions in America's Cities, June, 1984
- The Urban Poor and the Economic Recovery, September, 1984
- The Status of Hunger in Cities, April, 1985
- Health Care for the Homeless: A 40-City Review, April 1985
- The Growth of Hunger. Homelessness and Poverty in America's Cities in 1985: A 25-City Survey, January, 1986
- Responding to Homelessness in America's Cities, June 1986
- The Continued Growth of Hunger. Homelessness and Poverty in America's Cities in 1986; A 25-City Survey, December, 1986
- A Status Report on Homeless Families in America's Cities: A 29-City Survey, May, 1987
- Local Responses to the Needs of Homeless Mentally Ill Persons, May, 1987
- The Continuing Growth of Hunger, Homelessness and Poverty in America's Cities: 1987. A 26-City Survey, December, 1987
- A Status Report on The Stewart B. McKinney Homeless Assistance Act of 1987, June, 1988
- A Status Report on Hunger and Homelessness in America's Cities: 1988. A 27-City Survey, January, 1989
- Partnerships for Affordable Housing an Annotated Listing of City Programs, September, 1989
- A Status Report on Hunger and Homelessness in America's Cities: 1989. A 27-City Survey, December, 1989

- A Status Report on Hunger and Homelessness in America's Cities: 1990 A 30-City Survey, December, 1990
- A City Assessment of the 1990 Shelter and Street Night count. A 21-City Survey, June 1991
- Mentally Ill and Homeless. A 22-City Survey, November 1991
- A Status Report on Hunger and Homelessness in America's Cities: 1991. A 28-City Survey, December 1991
- A Status Report on Hunger and Homelessness in America's Cities: 1992 A 29-City Survey, December 1992
- Addressing Hunger and Homelessness in America's Cities, June 1993
- A Status Report on Hunger and Homelessness in America's Cities: 1993 A 26-City Survey, December 1993
- A Status Report on Hunger and Homelessness in America's Cities: 1994. A 30-City Survey, December 1994
- A Status Report on Hunger and Homelessness in America's Cities: 1995. A 29-City Survey, December 1995
- A Status Report on Hunger and Homelessness in America's Cities: 1996. A 29-City Survey, December 1996
- A Status Report on Hunger and Homelessness in America's Cities: 1997. A 29-City Survey, December 1997
- A Status Report on Hunger and Homelessness in America's Cities: 1998. A 30-City Survey, December 1998
- A Status Report on Hunger and Homelessness in America's Cities: 1999. A 26-City Survey, December 1999

To spearhead the Conference's efforts to respond to the emergency services crisis in cities, the President of The Conference of Mayors appointed 20 mayors to a Task Force on Hunger and Homelessness in September, 1983. That Task Force was chaired by New Orleans Mayor Ernest "Dutch" Morial. It is now chaired by Burlington Mayor Peter Clavelle and has 27 members.

Methodology

This report provides information on the current status of hunger, homelessness and the conditions which have affected them in the 25 cities whose mayors serve on the Task Force. A copy of the survey instrument sent to the cities is contained in the Appendix.

To respond to the survey, the city officials consult with and collect data from community-based providers and government agencies. The data is compiled by the individual or agency in the city government designated to be the Conference of Mayors' contact for the survey; and is reviewed by a senior-level manager before it is submitted to the Conference of Mayors.

The data was collected from the cities for the period of November 1, 1999 to October 31, 2000 during November and December, 2000. It was supplemented with data on population, poverty

and unemployment available from the Bureau of the Census and the Bureau of Labor Statistics. The reader should note that in no case do the percentages reported for a survey question include a city unable to respond to that question. In a few instances percentages do not total 100 due to rounding. Tables, which provide city-specific data on Hunger, Homelessness and Housing, appear at the end of each chapter.

Hunger

The Problem

Emergency Food Assistance Requests

During the last year, requests for emergency food assistance **increased in 83 percent of the survey cities**. The result remained the same in Chicago, Los Angeles, and New Orleans. **Across the cities, requests increased by an average of 17 percent**. Increases ranged from 25 percent in Nashville and Providence, 24 percent in Phoenix, 22 percent in Miami, 20 percent in Boston, Detroit and San Diego to 5 percent in St. Louis. Minneapolis and Salt Lake City reported a decline.

Among the comments from the city officials on requests for emergency food assistance:

Boston: Project Bread reports the same number of calls to its Food Source Hotline. But 72 percent of pantries report serving more clients. Several of the bigger food pantries report large increases, including Red Cross, which reports a 40 percent increase and Catholic Charities which reports a 47 percent increase. This increase reflects people using the pantries 8-10 times per year rather than 3-4 times per year.

Burlington: Hot meals rose by 10 percent at the Salvation Army and 25 percent at the Food Shelf. Grocery distribution at the Food Shelf rose by 11 percent for households and by 20 percent for individuals. Food Shelf deliveries to homebound seniors and persons with disabilities rose by 5 percent. The closing of the last downtown supermarket in Burlington in June 1999 directly correlates with the increased need for emergency assistance.

Charleston: The Low country Foodbank increased its distribution to other agencies to 25 in the City of Charleston.

Charlotte: Charlotte is seeing a large influx of people who are attracted to our strong economy. Unfortunately, many of these people have to accept less than living wages.

Chicago: As provided by the Chicago Anti-Hunger Federation and the Greater Chicago Food Depository, the information provided to this survey reflects recorded requests to the City's Emergency Food Assistance System.

Denver: More working poor families are relying on food banks to subsidize their food stamps and the food they can afford to buy.

Detroit: The department's Area Community Service Centers collectively report an average of 110 customers for emergency food each day. During peak periods, more than 155-160 customers have been traditionally reported.

Los Angeles: For most agencies, the number of clients has stayed relatively the same. The amount distributed per client has doubled.

Louisville: Employment wages, especially for those who are the working poor and the welfare-to-work recipients, do not allow enough in family budgets for food. Families have to make difficult decisions as to whether to pay for utilities, medicine or food.

Miami: The Salvation Army, Camillus House and the Miami Rescue Mission report that the requests for emergency food assistance has increased. Food for Life and Pass it on Ministries report that their requests have remained approximately the same.

Nashville: Both the Nashville Rescue Mission and Second Harvest Food Bank report a 25 percent increase in need. In response, the number of emergency food boxes distributed by Second Harvest, has grown by 10 percent (1,433 boxes). Two Food Bank sites remain open in the evenings, while one more site has been added. The agency plans to expand by including one more site next year. Nashville CARES reports that the total number of people served through its food pantry has risen from 400 to over 500. The amount of daily meals they deliver to home/bed-bound individuals living with HIV/AIDS has expanded by ten. More collaboration and referral systems have been implemented, including Metro School guidance counselors, churches, the City Health Department and housing agencies.

Norfolk: The FoodBank of Southeastern Virginia reports an increase from individuals and food service centers asking for food.

Philadelphia: Requests for emergency food assistance have increased due to the following factors: welfare reform; part-time work with no benefits; people are not paid a living wage; grandparents raising their grandchildren on their small social security checks.

Phoenix: Based on camparison of statistics collected by Association of Arizona Food Banks (AAFB)in '98 and '99.

Portland: There has been a 14 percent statewide increase in emergency meals served and a two percent increase in emergency food boxes distributed.

Salt Lake City: Affordable housing crisis; low wages; welfare reform; medicial emergencies

San Antonio: Based on a survey of agencies who provide emergency food assistance, the requests for food increase correlate directly to poverty. Low paying jobs, unemployment and employment related problems continue to lead the list of the main causes for hunger in San Antonio. In addition, research shows that many people leaving the Food Stamp Program remain eligible and in need. The implementation of the TANF program has had an adverse effect upon the food stamp program, as many clients falsely assume that the end of TANF assistance means the end of food stamp assistance. More than one-third of those eligible for the Food Stamp Program are not receiving benefits.

San Diego: The combination of a service-based economy (tourism) and one of the highest rental housing markets in the country (3rd) combined with lower public assistance benefits, is responsible for more people "falling through the cracks." Hence, a growing number of homeless people.

Seattle: There is a higher demand for emergency food assistance. The total number of requests for food assistance varied from month to month. Over the years, data supports the trend of increased demand for food assistance during summer months.

St. Louis: Families with Food Stamps increased by 3.5 percent; but total families served increased by 1.2 percent; the Hunger Hotline reflects an increase of 5.6 percent.

Trenton: Local non-profits reported an increase of 23 percent comparing this year data to last year.

Emergency Food Assistance Requests by Families

The number of families with children requesting emergency food assistance **increased in 83 percent of the survey cities.** A decrease occurred in Minneapolis and St. Louis. The result remained the same in Chicago and New Orleans. **Across the cities, the average estimated increase was 16 percent.** Increases ranged from 35 percent in San Diego, 30 percent in Detroit and Los Angeles, 22 percent in Miami, 20 percent in Philadelphia and Phoenix, 13 percent in Norfolk, 7 percent in Boston and 6 percent in Charlotte.

Among the comments from the city officials on the number of families with children requesting emergency food assistance:

Boston: Greater Boston Food Bank and Project Bread report an increase of families with children being served.

Charleston: There were no accurate numbers on the demographics of food recipients with the exception of a small prevention program funded through the City of Charleston Community

Development Block Grant. Nearly 82 percent of all requests for food came from households with children.

Charlotte: We are seeing more working parents, families where both parents are employed at minimum wage.

Chicago: Families are continuing to request emergency food assistance at a high rate of frequency. The ability to meet the rising cost of living remains one of the contributing factors.

Denver: There has continued to be an increase in underemployed one-income one-parent families and one-income, two-parent families.

Detroit: Unemployment, low wages, and other employment related problems have caused families to move in together to enhance their limited resources.

Miami: The overall requests for food assistance for families is directly proportionate to those for families with children. This figure is based on reports from the Salvation Army, Miami Rescue Mission, New Life Family Shelter, Food for Life, Pass it on Ministries and the Camillus House.

Nashville: The 10 percent increase estimate comes from Second Harvest Food Bank. Nashville CARES has seen a 2 percent increase, continuing to see shifts in the HIV/AIDS epidemic with notable increases in the number of females with children.

Norfolk: These numbers are reported through Food Bank agency surveys turned in quarterly.

Philadelphia: Philadelphia has experienced an increase in families with children requesting emergency food assistance, especially during the summer months and days when children are not able to attend school.

Phoenix: Forty-two percent of people served by food banks are children. Fifty-three percent are people in families with children under five years of age.

Portland: This increase is in proportion to the general increase in use.

Salt Lake City: Job market good, but expenses high for people earning $5.50-7/hr; families coming into town to work for Olympics; medical emergencies.

San Antonio: Again, poverty remains the key reason for the increase in demand for food assistance for families. Many of the working poor are spending more than half of their income on rent, which minimizes funds for other living expenses. In addition, families must make difficult choices during the time of a crisis and food money is often diverted into emergency expenses such as car repair, health costs, or medication costs. Like single individuals, families who exceed TANF time limitations often exit the food stamp program prematurely as a result of a lack of

information on eligibility. Research indicates that there is a growing gap between the number of children living in poverty and the number of children receiving food stamp assistance.

San Diego: More housed as well as homeless people are dependent on feeding lines and grocery handout programs to make ends meet.

St. Louis: Based on data from last year, greater than 75 percent of children enrolled in public schools in the City of St. Louis qualify for free or reduced lunches.

The People Requesting Food Assistance

Across the survey cities it is estimated that 62 percent of those requesting emergency food assistance were either children or their parents. In Charleston, Minneapolis, New Orleans, Norfolk, Philadelphia, and Providence three-fourths or more of those requesting emergency food assistance were members of families with children.

Officials in the survey cities reported that 32 percent of adults requesting emergency food assistance were employed. The percentage of employed adults requesting food assistance ranges from 70 percent in Nashville, 60 percent in Philadelphia, 40 percent in Louisville, 35 percent in Burlington, 25 percent in Chicago and San Diego, 10 percent in Chicago and San Diego, 10 percent in Trenton, and 6 percent in Detroit.

Emergency Food Assistance Requests by the Elderly

The number of elderly persons requesting emergency food assistance **increased in 75 percent of the survey cities.** The number remained the same in 25 percent of the cities - Charleston, Chicago, Miami, Minneapolis, New Orleans, and Norfolk. **Across the cities requests for emergency food assistance by elderly persons increased by an average of 9 percent**. Increases ranged from 25 percent in Trenton, 20 percent in Boston and San Diego, 17 percent in Los Angeles, 11 percent in Philadelphia, 9 percent in Portland, and 3 percent in San Antonio and St. Louis.

Among the comments from the city officials on the number of elderly persons requesting emergency food assistance:

Boston: Greater Boston Food Bank reports its "brown bag" feeding program for elders increased 10 percent. Red Cross reports a 50 percent increase at their pantry. According to Project Bread data, 60 percent of pantries report serving more elders.

Burlington: The closing of the last downtown supermarket in June 1999 lead to an increase in need for emergency assistance among the elderly.

Charleston: The data comes from the local Meals on Wheels agency.

Chicago: As provided by the Chicago Anti-Hunger Federation and the Greater Chicago Food Depository, the indicated information reflects recorded requests to the City's Emergency Food Assistance System.

Denver: Many seniors fail to collect their food stamp benefits due to the small amount offered to them. They do not feel the red tape is worth it. They prefer to use food banks to subsidize their food supply.

Detroit: Fixed incomes; predictably, most are high fuel users.

Los Angeles: Agencies have expanded their outreach, particularly outreach for the elderly population.

Louisville: The elderly and low-income families are having the same experience. Seniors also must make decisions to pay for medicine, heating utilities and food. Dare to Care assists them with the choice they must put at the bottom of the list.

Nashville: Second Harvest staff have targeted Senior programs to inform them of their services.

Philadelphia: The monthly fixed income of seniors is increasingly not sufficient to meet their needs.

Phoenix: The elderly have been affected by the closure of HMO's. Their fixed incomes don't stretch to cover medical expenses without insurance. In order to be able to purchase medicine, other needs go unmet, including food.

Portland: Three percent of all persons seeking food assistance over the past year are elderly and the increase in numbers is in proportion to the general increase in use.

Providence: The elderly prefer to prepare their own meals and do not take advantage of food stamps.

Salt Lake City: The elderly population is increasing and there is a lack of affordable housing .

San Antonio: The elderly living under the poverty level often seek food assistance from area agencies. The elderly also have health issues that adversely affect income for living expenses. For example, high health costs and poor HMO plans for medication compel many poor elderly

persons to make difficult survival choices. Many poor elderly residents often choose each month between paying their utility bill or buying groceries, as a result of medical costs.

San Diego: High rents and medication costs reduce discretionary income of people on fixed incomes.

Seattle: On an average, over 25 percent of those served by food banks are seniors 55 years of age or older.

St. Louis: In St. Louis, we have been unable to track what percentage of those requesting emergency food are members of families with children, but we do know that State Food Stamp data indicates families with children requesting food stamps has remained static. Requests from the elderly and disabled has increased approximately 3 percent. The Area Agency on Aging assists in this effort through an increase in its supplemental grocery program and a new program aimed at providing a second meal to the elderly who are at severe nutritional risk.

Trenton: The elderly has to spend more on housing and medical bills. As a result, funds are limited to buy food.

Causes of Hunger

Officials in the survey cities say hunger is due to a number of factors, many of them are interrelated. Those most frequently identified by the survey cities in response to an open-ended question, are low paying jobs, high housing costs, unemployment and other employment-related problems, poverty or lack of income, substance abuse, changes in the food stamps program, utility costs, the costs and unavailability of transportation, and welfare reform.

- Thirteen cities cited **low paying jobs** as one of the main causes of hunger. They are Burlington, Charlotte, Denver, Minneapolis, Nashville, Norfolk, Philadelphia, Phoenix, Portland, Salt Lake City, San Antonio, San Diego and Seattle.

- Twelve cities identified **high housing costs**: Boston, Charlotte, Denver, Los Angeles, Minneapolis, Nashville, Norfolk, Portland, Providence, Salt Lake City, San Diego, and Seattle.

- Twelve cities cited **unemployment and other employment-related problems**: Burlington, Charlotte, Chicago, Los Angeles, Miami, Norfolk, Phoenix, Portland, San Antonio, Seattle, St. Louis, and Trenton.

- Ten cities identified **poverty or lack of income**: Los Angeles, Louisville, Nashville, New Orleans, Norfolk, Phoenix, San Antonio, Seattle, St. Louis and Trenton.

- Five cities cited **substance abuse**: Chicago, Los Angeles, Miami, Philadelphia and St. Louis.

- Five cities identified **changes in the food stamps program**: Boston, New Orleans, Phoenix, San Antonio and Seattle.

- Five cities cited **high utility costs**: Boston, Chicago, Providence, San Diego and Seattle.

- Five cities identified the **costs and unavailability of transportation**: Minneapolis, Nashville, Phoenix, Portland, and Seattle.

- Five cities cited **welfare reform**: Minneapolis, Philadelphia, Salt Lake City, San Antonio, and Trenton.

Other causes of hunger identified by cities include **daycare costs** by Nashville, Philadelphia, and Portland, **mental and physical disabilities** by Denver, Miami and St. Louis, and **inability to budget money** by Providence and St. Louis.

The Impact of Immigration on Emergency Food Assistance

Among the comments from the city officials on the impact of immigration on homelessness:

Boston: Difficult for immigrants who are eligible to access food stamps. Pantries report more Russian, Cape Verdean, and Asian clients.

Charlotte: We have experienced a large influx of individuals and families from Mexico and Latin America.

Chicago: The City of Chicago does not record statistics regarding the impact of immigration on the delivery of emergency food assistance.

Denver: Minimal impact.

Detroit: None within our department. Most are usually met by FIA.

Los Angeles: Agencies have seen an increase of permanent resident aliens due to the termination or lowering of benefits to this group.

Louisville: The ethnic population in Louisville is growing (Bosnian, Vietnamese, Mexican) thus the increased need for assistance. Over the past three years, official resettlement agencies have brought in 1,200 people per year. Some 31.4 percent of these are refugees; this is three times the national average. The secondary migrant population is unknown, though there has been a 47 percent increase in the Asian population and a 48 percent increase in the Hispanic/Latino population in the past ten years.

Miami: This information is unavailable to us at this time, as it is not tracked by our reporting agencies.

Minneapolis: New arrivals has increased demand for assistance.

Nashville: Some impact. Seeing more Hispanics at Second Harvest sites and at the Campus for Human Development. Nashville CARES notes no impact as yet.

New Orleans: No discernable impact.

Philadelphia: We purchased some additional rice but most of the immigrant population were able to prepare and eat the standard food given out in the monthly package

Phoenix: Citizenship is not a requirement to receive emergency food assistance. Food stamp enrollment is down - 2/3 of those eligible in Maricopa County are not receiving food stamps. AAFB believes about ½ of these are LEGAL aliens who do not think they are eligible. These people (about 100,000 each year) use the food banks instead of food stamps.

Portland: Large numbers of Eastern Europeans have settled in the Portland metropolitan region. Many of these households tend to look within their own communities for assistance and do not approach mainstream community resources.

Providence: Many immigrant families move from house to house and require assistance

Salt Lake City: Immigrants are not specifically tracked, but they have a harder time getting services. This will increase because the state just passed an "English Only" referendum that limits the ability of government to work in multi-lingual settings.

San Antonio: San Antonio is the largest city in South Texas. As a result, a large immigrant population resides here. Individuals who flee Mexico and other Latin American countries in search of employment opportunities, more often than not, undergo many challenges in residential stability and living costs. As a result, some immigrants seek emergency food assistance.

San Diego: The service level of this population has remained fairly constant due to "closing the border" efforts.

Seattle: Several neighborhood food banks have reported that they are serving more clients from the Eastern European and East African countries. There does not seem to be a difficulty in meeting the demand for food. What presents a challenge is the limited selection of the types of food that are relevant and appropriate to the different cultures and religions. This is an ongoing issue for the food programs.

St. Louis: The City of St. Louis has seen an influx in immigrant population. Pantries in certain areas of the City have reported serving immigrants, but there is no definite count.

Trenton: We have seen a slight increase in immigrants requesting food assistance. Many of the immigrants do not have proper papers and therefore are unable to quality for any federal, state or city emergency assistance programs. These families are referred to our food pantries.

Capacity to Meet the Need

Emergency Food Assistance Facilities

During the last year the number of emergency food assistance facilities **increased in 48 percent and remained the same in 48 percent of the cities.** The number decreased in San Diego. Cities in which they increased are Boston, Charlotte Chicago, Minneapolis, Nashville, Norfolk, Philadelphia, Portland, Salt Lake City, Seattle and Trenton.

Among the comments from the city officials on the number of emergency food assistance facilities:

Boston: The number of pantries has increased from 99 to 103.

Charlotte: Loaves & Fishes, Charlotte's largest emergency pantry program, added a 16th site to its network in 2000.

Chicago: The number of emergency food assistance facilities has increased to meet the existing demand.

Detroit: It varies from month to month based on non-availability of continued funding.

Louisville: No new operations have opened to our knowledge.

Minneapolis: Added two new outlets to better serve the increased diversity – Latino, Russian and Somalian.

Nashville: It was a 10 percent increase. Second Harvest opened a new site this year at Star Ministry; they will open another next year at the Salvation Army's Magness Potter center. They are looking into a traditionally underserved area of the county (the Whites Creek area) and may possibly open another site there, depending on funding. In February 2001, they will begin a collaborative referral program with Senior Citizens, Inc.

New Orleans: Continuing to look for new agencies.

Norfolk: The Food Bank reports a slight increase in member agencies.

Philadelphia: Churches and other 501(3) organizations have responded to the increased need in their communities

Phoenix: Some partners are out of business and some new ones have started.

Portland: Twenty-two new agencies have joined the Oregon Food Bank Network and six have discontinued services.

Salt Lake City: The Utah Food Bank and Crossroads Urban Center have both remodeled and expanded services.

San Antonio: No new emergency food assistance programs have been created.

San Diego: Some program closures, reduction in service level of food bank capacity due to reduction in facility availability.

Seattle: There are over 80 known meal programs in the city of Seattle. Many more are incorporated in shelters and community homes and congregate meal sites for the elderly. Last year, there were 30 food banks in the city of Seattle; this year, there are 29. One new formal emergency meal program establishment has been added to the network of meal programs. And, many faith-based and grassroots organizations provide meal service to those who are hungry.

St. Louis: The number is stable, but information indicates some facilities have closed and new ones have opened up.

Trenton: More churches are developing food pantries.

During the last year, the level of resources, such as food, and or volunteers available to emergency food assistance facilities is estimated to have increased by 16 percent. The level of resources increased in 43 percent of the cities, decreased in 26 percent and remained the same in 30 percent.

Among the city officials' comments on the level of resources available :

Boston: Many more after school programs are accessing food resources. USDA commodities have increased 10 percent.

Burlington: The number of volunteers at the Food Shelf increased this year by roughly 19 percent. Food donations rose by 12 percent. Community donations (both food and money) were the principal source for meeting increased emergency assistance needs. Interim transportation to suburban supermarkets (pending completion of a new downtown supermarket) was supported by state and local grants.

Chicago: The level of funds dedicated to emergency food service provision has remained relatively unchanged. Despite this fact, the overall level of resources (donated food, volunteer time, etc.) has increased.

Detroit: Federal and state budget funding are inconsistent and are primarily used for start-up funding and seldom available for the long haul.

Louisville: Funding has increased by 3 percent while volunteers have decreased by 5 percent. Volunteers are usually retirees and that population is aging out.

Miami: The Salvation Army reports that the level of resources has remained the same, but with a local mandate for High School Seniors to do Community Service hours before graduating has increased the number of volunteers. The Miami Rescue Mission reports their level of resources increased by approximately 15 percent. New Life family Shelter reports a slight increase in resources. Their volunteers consists of residents within their facility.

Nashville: Second Harvest reports that funds and donations of certain foods have decreased, although volunteer resources are up. Because of decreased resources, they have started canning 4-5 products and working with Tennessee Cook Chill. The Nashville Rescue Mission has seen more responses for donations, but overall the amount is down from last year. Nashville CARES estimates that the general level of resources is down, but that the percentage is difficult to estimate. As their clients' food needs have increased, they have had to adjust the amount of food that they allocate per individual food bag to meet the need. The reduction was approximately 25 percent of the cost. In this process, they have been able to search out low cost foods so that the decreased resource does not significantly affect the quality of the food bag. Because other providers are using the services of Nashville's Table (a local food rescue program) as a resource, CARES has decreased resources for congregate meals. Meal delivery volunteers remain a challenge. The YWCA Domestic Violence Shelter now has a larger facility and is serving many more people as a result. Their budgetary needs have expanded, but there are not always the resources. They have supplemented by donations and sometimes they will purchase food to fill the gap.

New Orleans: Supply seems to follow demand.

Norfolk: Funds have been outstripped by the expenses and certification/health costs around food distribution. Military volunteers are a great resource; women generally work. The physical distribution is generally too hard for elderly volunteers.

Philadelphia: There has been a reduction in state funding for the state supplemental food program along with fewer city general fund dollars available to support the soup kitchens and shelters. At the same time the Philadelphia Emergency Food Providers continue to work together to purchase foods that are nutritious and affordable in order to be more effective in meeting the need. The amount of fresh produce going to food cupboards has increased.

Phoenix: The increase is because new funds have become available. There has been about 14 percent increase in fresh produce - more Second Harvest food. Coordination of resources helps food banks maximize their efforts. Possible SSBG cuts this year will effect the community's ability to serve hungry people.

Portland: Volunteer hours have increased 33 percent statewide which includes, locally, a total of 24,258 hours. Also, the total food received statewide through the Oregon Food Bank and its network has increased by 22 percent. We believe that this needed increase is a community response to the chilling fact that Oregon is rated the number one state in percentage of people going hungry and the sixth least food secure state.

Providence: There are fewer donations and a decrease in funding sources

Salt Lake City: The resources have stayed the same but needs have increased.

San Antonio: Agencies have seen an increase in the number of volunteers, food donations and other private fund-raising. Many agencies have initiated many creative endeavors to raise funds. One agency vowed to raise $20,000 for its food pantry by fasting (committing themselves to a bread and water diet) during Thanksgiving until funds were raised. In addition to the agency founders and volunteers, a city councilman and his staff signed up to participate until the funds were raised.

San Diego: Funding is up. In the past, Los Angeles and San Francisco have received a larger share of the dollars, but San Diego is getting a more proportionate share now.

Seattle: Annually, there is a cost of living allowance increase in the Human Services Program and General Funds in Seattle for the next biennium. However, the need for transportation of the food and essential non-food grocery items and cold and dry storage, particularly for smaller food banks and smaller meal programs, continue to be a challenge. Food providers continue to advocate for more dollars to help meet these needs. In the upcoming City of Seattle biennium budget, it is hopeful that their advocacy work will pay off. Also, the food programs are seeing more contributions from private foundations, major corporations, and the local business and

faith-based communities. There continues to be a good stream of donations from local bakeries and grocery store chains, food growers, and distributors.

St. Louis: Facilities receiving USDA commodities have seen a decrease in supply.

Trenton: Funding has leveled off however donations and volunteers have increased.

One hundred percent of the survey cities reported that emergency food assistance facilities were used both for emergencies and as a steady source of food over long periods of time.

Among the city officials' comments on the use of emergency food facilities:

Boston: Twenty percent of callers to Food Source Hotline are repeat callers. Many pantries report increased repeat clients.

Burlington: While emergency food assistance has always a steady food source for those unable to afford groceries over long periods of time, the closing of the last downtown supermarket exacerbated the food security problem in Burlington. When the new downtown market opens next summer, demand should return to "normal" levels.

Charlotte: We have a variety of emergency food assistance programs; pantries, soup kitchens, shelters, etc. Each is designed to serve a different part of the at risk population.

Chicago: The City of Chicago's Emergency Food Program is funded and operated for emergency use only. However, Chicago not-for-profit Food Programs can and sometimes do become a regular source of food.

Denver: We see some families and individuals every month. They depend on food banks to make their food supply last from one month to the next.

Detroit: We are used as a steady source of food for long periods of time, particularly, as supplements to homes with fixed incomes.

Los Angeles: Many emergency food assistance facilities have clients that use the facilities as emergency resources but an increasing amount are using the food programs as a supplement for their food budget.

Louisville: Dare to Care provides emergency food assistance both directly and through other social service providers. In 1999, working in partnership with over 300 agencies that have feeding programs, the agency distributed 7.5 million pounds of food. Through the city's system of homeless shelters, it provided food for 12,723 homeless shelter clients and 10,292 day shelter

clients. Dare to Care's local network of 29 distribution centers, which supply one to seven days worth of food to those in need, distributed food boxes to nearly 30,000 families.

Miami: All major shelters report that they utilize the emergency food banks as a steady source of food for the shelter participants. Agencies providing emergency food to those living on the streets report that about 25 percent of those requesting food assistance use their services as a steady food source.

Minneapolis: Agencies serve both families and individuals in transition and during crisis.

Nashville: We are used typically for emergencies only, but in some cases both. Second Harvest only serves clients 3-4 times in a 6-month period of time. Each time, the person receives a 3-4-day supply of food.

Norfolk: Some families and individuals are served on a regular basis due to their financial situations. Facilities are used for emergencies most of the time while some facilities provide food to families on a monthly basis. The search for variety encourages facility "hopping." Uniform and adequate food sources are needed.

Philadelphia: Eighty-two percent of the people seeking food at cupboards are returning almost every month. The emergency food assistance network helps to provide food so families can use their money to meet other essential needs

Phoenix: While most food banks limit service to 6 times a year, many families use multiple food banks to stretch those limits. Also, many food banks offer supplemental programs like Food Plus and cooperative food buying programs such as Food Care, Care Club, etc.

Portland: Oregon is ranked number one in percentage of population going hungry and is the sixth least food secure state in the nation. What started as an "emergency food system" is now providing food for people experiencing chronic shortages of food.

Salt Lake City: We are finding that people are running out of food sooner.

San Antonio: Agencies surveyed indicated they provide food due to household crisis as well as to those who cannot feed their households nutritionally balanced meals on a regular basis.

Seattle: Emergency food programs are used for a limited period of time; however, many people rely on emergency meal programs and food banks on a regular basis. This has been reported by food bank providers and this could be due in part to the residual effect of welfare reform legislation, including the changes in the food stamp education funds and the continued perception of people not being eligible for food stamp benefits.

The Quantity of Food Provided

Fifty-two percent of the cities reported that emergency food assistance programs are able to provide an adequate quantity of food; 48 percent of the cities said they are not. Among the officials 'comments:

Boston: Pantries give between a 4-5 day supply of food.

Burlington: Our emergency food assistance facilities attract sufficient funds and food to feed the hungry.

Chicago: The quantity and the nutritional value of each City of Chicago food package/bag are evaluated by a Chicago Department of Human Services nutritionist. Additionally, emergency food assistance facilities address the specific and long term needs of each client.

Denver: People in Denver are not starving, but they have to go to multiple places to acquire enough food to supplement what they can afford to buy.

Detroit: The department's emergency food box (pantry pacs) usually contains fifteen nutritionally-balanced meals which will only temporarily meet a household's emergency need. The quantity usually depends on the availability of the food at the time of the request.

Los Angeles: Although food pantries try to provide an adequate amount of food to clients, many times, the needs are greater than the resources.

Louisville: Efficiency in operations allows us to give quantity and quality. Fresh produce is now available to distribution centers.

Miami: All agencies at this time report an adequate supply of food resources.

Minneapolis: Often cash assistance is used as a supplement to food assistance.

Nashville: Sometimes agencies have limited resources; supplies of meat, fruit, peanut butter, rice and pasta can be limited.

New Orleans: We can supply up to 5 days of assistance every 2 months.

Norfolk: A three-day supply of food is provided by most facilities. Some facilities are able to provide a larger supply.

Philadelphia: Most of the cupboards say they do not turn people away because they have run out of food. However, most of the cupboards say their cupboards ran out of food in the past year, but

they had gone out and purchased food so they did not have to turn anyone away. It is not expected that this practice will enable cupboards to meet the demand

Phoenix: Most food boxes will have enough food for a family for 3 to 5 days. These start at 35 lbs. for a family of 4 and to 50 lbs. based on family size.

Portland: Ninety-three percent of respondents to our statewide survey indicate that their monthly food stamps run out at least a week before the end of the month. An emergency food box usually provides a complete 3-day supply of food for each person in the household which leaves a few days not covered at all.

Salt Lake City: Some times are leaner than others, but the facilities have never actually run out.

San Antonio: Most agencies surveyed indicated that they have sufficient resources to meet basic needs only.

San Diego: Between food lines and food assistance, most people seem to be able to eat adequately enough to avoid malnutrition.

Seattle: Many food banks are only able to provide enough food to feed a family or individual for one or two days a week. Although there seems to be plenty of food products at the food banks, the products may or may not meet the dietary needs of the household. There are reports from outdoor meal programs that they often must turn clients away because they ran out of food. Most emergency meal programs are unable to provide three meals a day, seven days a week, and many only provide a meal once or twice a week.

St. Louis: Most families seek help from more than one facility. Depending on size of pantry and number of staff, many facilities provide food for several meals to a supply of food for several days.

Trenton: Most pantries provide 3 meals a day for 3-5 days depending on size of the family.

Seventy-six percent of the survey cities report that emergency food assistance facilities have had to decrease the quantity of food provided and/or the number of times families or individuals can come to get food. Among the city officials' comments:

Boston: Our policy remains the same as it has in the past.

Chicago: The city's food program is adjusted based upon actual client need. Repeat requests are referred to intensive case managers for assistance. Based upon the findings, it may be necessary

to limit distribution to some individuals. Chicago not-for-profit food programs provide food strictly on a case-by-case basis.

Detroit: Resource availability determines the quantity and the frequency individuals can report to most agencies. However, there are exceptions within this department when extreme emergencies can be substantiated.

Los Angeles: One agency reported that they had an increase in the number of clients. If the recent increases in the number of clients continues to grow and the funding resources do not adjust, then the probability of decreases in services for this agency will result.

Miami: All agencies report that each case is treated individually. In most cases, facilities limit the number of times an individual can receive services in order to decrease misuse of the system.

Minneapolis: Generally, clients are limited to one visit per month.

Nashville: Second Harvest will always serve clients, but if the resources are limited, the food boxes have less food, and may not be as nutritious.

New Orleans: The number has increased to every two months from every three months.

Norfolk: The supply of food is not adequate; therefore, the agencies are decreasing the amount of food per family in order to serve more families.

Philadelphia: Fifty-five percent of the food cupboards reported having to decrease the amount of food they give out to make sure they have enough for everyone that comes to their cupboard.

Phoenix: Forty-eight percent of food banks report having to do this. There has been a 7 percent increase in food and a 24 percent increase in demand.

Portland: The Oregon Food Bank works hard with agencies to ensure that they understand that there are options to reducing the amount of food provided or the number of visits allowed in a year. However, because of limited resources, some agencies have chosen to limit the number of times households can access food. The Oregon Food Bank also requires that emergency food boxes contain at least a 3-day supply of food and the Oregon Food Bank continues to seek additional food for agencies addressing hunger.

Providence: Some funding sources limit the amount of times food can be distributed, others provided ongoing assistance.

Salt Lake City: Occasionally, but rarely.

San Antonio: Most agencies surveyed indicated that they did not decrease the quantity of food or limit the number of visits. The agencies that lack adequate quantity of food provisions refer clients to larger food agencies to ensure that food needs are addressed.

San Diego: The response to hunger ranges from individual to faith communities and programmatic sources.

Seattle: The food banks supplement the donated foods and non-food grocery essentials they receive with purchased products. Families and individuals are limited to visiting a food bank to once per week. The food banks in the City of Seattle also use zip codes to avoid duplication of service. Clients are not turned away if they visit a food bank out of their catchment area; however, they are served and encouraged to visit a food bank in their neighborhood.

St. Louis: The pantry system is designed to supplement other food resources. Most pantries limit supply to once or twice per month. Others distribute 3 times per week within a certain number of hours. Some will distribute based on social service referrals. Most often, the pantry system is not able to complete the difference between how much food is needed and when the next food resource becomes available.

Trenton: Most pantries serve a family once a month so that the family do not become dependent on the agency for food assistance.

Twenty-four percent of the cities which have had to decrease the quantity of food report that during the last year emergency food assistance facilities have had to increase further the limit on the number of food bags provided and/or decrease further the number of times families and/or individuals can come to get food.

Among the city officials' comments on the limit of food assistance:

Boston: Policy remains the same as it has in the past.

Charleston: There are limits on the number of times individuals can return for pantry items and those vary from agency to agency. Each agency reported success with referring individuals and families to other agencies in the area when their resources were limited.

Louisville: The needs are met; wants are not met; wishes not considered.

Miami: Shelters say that they are able to give an adequate supply of food per request. One emergency food assistance program limits assistance to once per year.

Minneapolis: This year, the pound per family increased from 9 to 12 per month.

Nashville: There is a limit on people being served. People will be referred from Second Harvest satellite sites to other emergency food box programs. The number of times a person can come for a box stays the same - 3-4 in six months. Nashville CARES has chosen to decrease the amount of food per bag, and has always had to limit the number of available delivered meal slots, which never meets the requested needs.

Norfolk: Food Bank member agencies report there has been a great increase in the past year. Most facilities limit the amount of food distributed.

Philadelphia: Forty-five percent of the food cupboards reported having to limit the number of times families and/or individuals can come to their cupboards in order to ensure there is enough food for everyone.

Phoenix: Most have tried to limit the number of bags/times, but will not turn a family away based on this limit only, if there is a need.

Portland: The Oregon Food Bank works hard with agencies to ensure that they understand that there are options to reducing the amount of food provided or the number of visits allowed in a year. The Oregon Food Bank also requires that emergency food boxes contain at least a 3-day supply of food and the Oregon Food Bank continues to seek additional food for agencies addressing hunger.

Salt Lake City: There is always food, but the kinds of food vary.

San Antonio: Most agencies have not enacted such stipulations. The few agencies that have such restrictions on limit or frequency of services refer clients to larger food agencies.

Seattle: Some food banks must tighten up on eligibility requirements, limiting assistance to only those households living within their designated service and/or selective in the amount of items that are packed in the food bank bags.

St. Louis: We are not aware of any additional limits within the pantry system.

Trenton: The majority of time, food pantries give what they have upon request. However, the number of times a family receives food assistance is decreased.

The Quality of Food Provided

Fifty-two percent of the survey cities report that emergency food assistance facilities are able to provide nutritionally balanced food. Forty-eight percent of the cities are not able to consistently to provide nutritionally balanced food. Among the city officials' comments:

Boston: Technically yes, but not as varied as it has been in the past.

Charleston: Many of the food programs in our city use USDA food and standards.

Charlotte: Loaves & Fishes provides food from a nutritionally balanced bagging list compiled by a registered dietician.

Chicago: The contents of the food packages/boxes, which are provided through the City of Chicago, are reviewed annually to ensure nutritional balance. The box content review is conducted by a City of Chicago, Department of Human Services' nutritionist. Chicago Not-for-profit food programs are encouraged to participate in the nutrition and food handlers certification program offered by the Chicago Anti-Hunger Federation. In addition, fresh fruit and vegetables, dairy and other refrigerated products have become standard in the system.

Denver: Overall, it is. There are times when food banks are given an overabundance of "unhealthy" foods, such as Halloween or Christmas candy, but we strive to acquire nutritional foods that will offer our clients the opportunity to provide healthy, well-balanced meals for their families and themselves.

Detroit: State nutritionists have assisted in determining the contents of the emergency food groups for the food boxes provided to customers.

Los Angeles: Food provided include: breads, meats, tuna or other fish, fruits, juices, rice, milk, vegetables, pasta, and infant food and formulas.

Louisville: The Nutrition Pyramid is a guide. Availability of fresh produce has helped increase nutrient value.

Miami: Trained staff plan meals at the shelters. Emergency food bags are prepared with the three food groups in mind, but may be limited to availability.

Nashville: Most of the time. When resources allow, they are nutritionally sound. Agencies such as Ladies of Charity and the Campus for Human Development fill food boxes with items from all food groups. Items such as peanut butter, tuna and dairy products are included in each basket. Second Harvest Food Bank has limited resources many times, so they now do their own canning of certain products (soups, stews). They also work with Tennessee Cook Chill/ Co-Op program purchasing main entrees, which are high in protein, as well as convenient to prepare. Nashville CARES has always worked with local dietetic and nutrition specialists to make sure that the food most closely mirrors the specific nutritional needs of person living with HIV/AIDS.

New Orleans: Approximately 2/3 to 3/4 of the food supply given is nutritionally balanced.

Norfolk: Every effort is made to provide nutritionally balanced food, however, meat, fresh fruit and vegetables are not always available.

Philadelphia: It varies; the food cupboards receive a basic food package that includes items for breakfast, lunch, and dinner. If the cupboards have the resources to take advantage of all of the food providers in Philadelphia they not only have nutritionally balanced food but variety as well.

Phoenix: Maricopa County Health Department and Cooperative Extension provide guidelines as to what needs to go in a food box. These guidelines are followed according to what food the food banks have available.

Portland: The foods are nutritionally balanced, including donated and purchased food as well as USDA commodities. The USDA Food Pyramid is used as a basis for the contents of each food box.

Providence: By using a variety of sources, the food provided is usually nutrionally balanced.

Salt Lake City: Sometimes the choices are more limited than others.

San Antonio: The food's nutritional balance is based on foodstuff available at time of the request.

San Diego: The Emergency Resource Group coordinates nonprofit services, funding, and contributes with existing needs.

Seattle: The majority of products being distributed are donated products and, for the most part, food programs continue to make a real effort to provide foods that can be used to prepare nutritionally balanced meals. Many of the meal programs and food banks pool funds to make bulk purchases of nutritious foods which they would not be able to buy using their own funds. Such products include chicken, ground turkey, dairy products, and fresh fruits. One specific program provides food "paks" that are based on a person's dietary needs due to health and medical reasons and/or cultural reasons.

St. Louis: The food is nutritionally balanced but is also based on whether there are resources to complement the donated food. Purchasing additional resources is the exception rather than the rule.

Trenton: The pantries attempt to give out fresh fruits, vegetables and meat.

Funding

City Government Spending Public Funds to Support Local Emergency Food Assistance Efforts

During last year city government spent public funds (either locally generated revenues or federal or state grants) to support local emergency food assistance efforts.

Approximately 30,033,926 was used by these city governments to support emergency food assistance efforts during the last year. Among the sources of the funds used by city governments, locally generated revenues accounted for 12.74 percent, state funds for 23.67 percent, McKinney Homeless Assistance funds for 3.33 percent, the Community Development Block Grant for 10.14 percent, the Community Services Block Grant for 0.59 percent and other federal funds for 49.52 percent.

Cities that used **locally generated funds** to support emergency food assistance efforts:

Boston	562,720
Denver	30,000
Louisville	25,000
Minneapolis	1,666,100
Norfolk	42,000
Philadelphia	25,000
Providence	23,000
San Antonio	1,632
Seattle	1,450,916

Cities that used **state grants** to support emergency food assistance efforts:

Boston	2,500,000
Detroit	189,148
Minneapolis	316,982
Philadelphia	4,090,725
Providence	11,000
Trenton	1,000

Cities that used **McKinney Act funds** to support emergency food assistance efforts:

Nashville	100,091

Cities that used **Community Development Block Grant funds** to support emergency food assistance efforts:

Burlington	6,250
Chicago	1,890,000
Miami	776,817
Providence	300,000
Salt Lake City	73,500

Cities that used **Community Services Block Grant funds** to support emergency food assistance efforts:

Denver	16,000
Detroit	150,846
Providence	5,000
San Antonio	6,574

Unmet Need

Estimated Overall Demand for Emergency Food Assistance Which Goes Unmet

An average of 13 percent of the demand for emergency food assistance is estimated to have gone unmet in the survey cities during the last year. The unmet need ranges from 33 percent in Detroit, 23 percent in Los Angeles, 10 percent in Boston, Denver, Miami, and New Orleans, 7 percent in Trenton, 2 percent in San Antonio, and one percent in Burlington.

For families alone, an average of 13 percent of the demand for emergency food assistance is estimated to have gone unmet in the survey cities during the last year. The unmet need for families range from 40 percent in Louisville to 33 percent in Los Angeles, 15 percent in Philadelphia, 11 percent in Norfolk and Phoenix, 10 percent in Boston and Denver, 5 percent in Miami and Trenton, and one percent in Burlington and San Antonio.

Among the city officials' comments:

Boston: Demand has gone up about 20 percent with resources increased about 10 percent. The Boston Public Schools have been a tremendous resource for children during the school year, and now in the summer and after-school.

Burlington: The community responds well to needs for emergency food assistance.

Charleston: This number was unavailable from every feeding programs contacted.

Chicago: Despite the overall abundance of resources city-wide, selected communities within Chicago cannot adequately address the needs of their residents. As a result, clients are referred to other communities to receive service. In addition, the city does not have an established mechanism to secure data on clients which do not make a formal request for assistance. Correspondingly, there is potentially a segment of the population which remains un/under-served.

Detroit: To our knowledge, the information is not tracked. More than one-third of the population receive food stamps and/or FIA assistance.

Louisville: Hunger is present morning, noon and at night. Food centers can take care of only a part of the complete daily need.

Minneapolis: Families use alternative resources including family and friends.

Nashville: Unknown. There are geographic pockets that are more underserved than others, where there are many unmet needs. Also, senior citizens sometimes do not qualify for assistance, because of age, income, etc. Second Harvest is very concerned about these underserved populations.

New Orleans: Due to chronic poor, many people are unaware of where to get help.

Norfolk: It is difficult to estimate these figures because some facilities do not record this information or reduce the size of food boxes to meet all requests.

Philadelphia: Food cupboards are open only 2 days a week, give people enough food for 3 meals a day for 3 days and for many the needs are greater than once a month for three days

Phoenix: A minimum of 14 percent of food bank recipients report getting food stamps and still go without food 1 to 2 days each month and inadequate amount of food on other days.

Salt Lake City: Not sure of above percent, but 50 plus percent qualify for food stamps but don't get them.

San Antonio: The percentages above reflect the responses of those agencies surveyed that indicated that they have to turn clients away.

Seattle: Unknown. Emergency food programs keep records only on the number of people served, not on the number of people turned away. Clients are rarely turned away. There are

several reported instances of turn aways. Meal program and food bank clients are generally escorted and/or asked to leave the premises if they present a threat to other clients and/or program staff and volunteers getting groceries or having a meal.

St. Louis: We believe that we are meeting the need for emergency food assistance through an intricate referral network, community education centers and formal organizations such as United Way, Salvation Army, St. Patrick Center and faith-based initiatives.

Trenton: The information is based on data from the City of Trenton's Division of Community Relations and Social Services.

People Turned Away

Forty-six percent of the cities report that emergency food assistance facilities may have to turn away people in need because of lack of resources; 54 percent report they do not.

Among the comments of the city officials which may have turned people away:

Boston: Yes, but many people broker for resources at other emergency feeding programs.

Burlington: Burlington's emergency food assistance facilities attract sufficient funds and food to feed the hungry.

Charleston: This is only occasionally true but there are no reports of not being able to find a referral source for food.

Chicago: Chicago Not-for-profit emergency food facilities efficiently utilize available resources. They respond to people in need, by either accommodating requests directly or by referring requests to other emergency food service facilities. In addition, the City of Chicago has established an emergency response food provision system. This system safeguards against depleted food supplies due to unforseen natural disasters and/or an unexpected increase in requests.

Denver: Food banks have the capacity to serve a limited number of people per day due largely to a lack of physical space. Additionally, but not due to a lack of resources, some people do not get the supplies they need because they are working when the food pantries are open.

Detroit: Usually during peak periods or the holiday season when requests and demands are greater. However, limited resources usually dictate whether the department can accommodate every emergency food request.

Los Angeles: Agencies serve anyone in need but quantity may be limited.

Louisville: Hours of operation at distribution service centers vary; transportation problems.

Miami: Agencies report that seasonally, there is a portion of people that have to be turned away.

Minneapolis: Facility managers can use cash assistance and refer clients to other food shelf facilities.

Nashville: Second Harvest only turns away people when they have received their full allotment. The number of slots at Nashville CARES' meal program in Davidson County is limited to 65.

New Orleans: A person is turned away if a repeater.

Norfolk: There is not an adequate supply of food. The food bags/boxes are meager and folks have to search for a good source from place to place.

Philadelphia: This is difficult to answer. Food cupboards are open on specific days and during specific hours. There are very few, if any, food cupboards that are open all day every day. Seventeen percent of the food cupboards reported they had to turn someone away in the past three months.

Phoenix: No, but many who are eligible may not be coming to food banks.

Portland: The agency has said that they turn away people due to the lack of food, although limiting the number of times an individual can access food boxes may have the same effect. Increased demand strains individual agencies' ability to respond. More agencies are turning to everyone they can in their community for support. We believe that there are more people hungry than are receiving emergency food at this time.

Providence: If one agency cannot meet the need, clients are referred to another agency

Salt Lake City: There are times of scarcity.

San Antonio: Sixty-three percent of agencies surveyed indicated that they did not turn people away because of a lack of resources. Thirty-seven percent of agencies surveyed indicated that they did as a result of limited funds required and unavailability of essential food items; clients are referred to larger agencies in such cases.

Seattle: A meal program or food bank may not have a particular food item that an individual needs; however, programs rarely turn people away. Meal programs and food banks do the best they can to provide their consumer something, whether it be serving a peanut butter and jelly sandwich if the regular meal being served is all gone (which is very true for one outdoor meal provider in downtown Seattle) or whether it be a bag of groceries with some essentials. The

majority of the food banks attempt to serve all people requesting food, which frequently results in severely limiting the amount of food made available to each individual/family.

St. Louis: The general rule of thumb is that if food is not available in one pantry, the network refers to another source of food.

Trenton: However, most people are served based on circumstances.

Exemplary Programs

Among the comments from the city officials on an exemplary program or effort underway which prevents or responds to the problems of hunger:

Boston: The Brown Bag program provides 10-15 pounds of nutritionally dense food once a month targeted to elders and families with children. Brown Bag is a collaboration between the Greater Boston Food Bank and ABCD Mattapan Family Service Center, Commonwealth Tenants, ABCD Elm Hill Family Service Center, Kent Charlestown Community Center, and Boston Housing Authority at 8 sites. Project Bread and Mass General Hospital have just completed a study of universal free breakfast in several Boston Public Schools. The results indicate a link between proper nutrition and increased student performance. Project Bread will be filing legislation at the State House for a targeted program to bring universal free breakfast to over 250 schools in the Commonwealth. The Boston Public Schools now assists 137 After School Programs with food up from 7 programs in the Fall of 1998 Food Drive for the Hungry is a collaboration between the American Red Cross and Project Bread to assist in the transport of food to pantries and meals programs which do not have the capacity to transport otherwise. Catholic Charities has recently relocated to Dorchester and operates a multi-service center which has been successful working with a range of community needs.

Burlington: Last year, the Chittenden Emergency Food Shelf was forced to turn away roughly 100,000 pounds of donated food because of limited storage capacity. "Warehousing a better tomorrow" will allow the Food Shelf to secure 2,300 square feet of additional warehouse storage space which will support the expansion of existing programs and new initiatives like the Snack Drop that delivers healthy snacks and food pantry supplies to public housing, homeless providers, and other social service agencies.

Charleston: The Low Country Food Bank is an example of an exemplary program. This year alone, this organization increased the number of deliveries to agencies from 35 to 60. This occurred from an agreement negotiated between the non-profit and the Department of Social Services to distribute USDA food free to the community. This organization is responsible for feeding thousands of school children every day. They began a program called Kid's Café which

serves meals to children in school based after school programs. In many instances this is the only hot meal a child has before going to bed at night.

Charlotte: The Society of St. Andrew's Charlotte Gleaning Network works to salvage fresh produce from farmers, packers, and shippers. Established in 1992 volunteers from the Charlotte area have salvaged and distributed over 2.1 million pounds to those at risk of being hungry in the Charlotte area. This year, over 825 volunteers have worked to glean over 500,000 pounds of nutritious food.

Chicago: The Kids Café Program is a national initiative of America's Second Harvest and its members. Established in 1993, the Kids Café program addresses the issues of childhood hunger by setting up after school programs that provide hot meals, tutoring and other educational activities. There are three "Kids Cafes" located in Chicago (in Filson, Austin and on North Michigan Ave.) The Greater Chicago Food Depository is currently working with its member agencies and community leaders to establish additional "Kids Cafes" throughout the Chicago land area.

Denver: Several food banks in Denver have begun communicating via e-mail to let one another know what their needs are and/or to share supplies. They also use e-mail to get food supplies moved from one place to another and to help families meet specific needs for housing and other types of emergency assistance.

Detroit: The City of Detroit, Department of Human Services, provides food boxes year-round through the Emergency Food Program. Food boxes are distributed to eligible persons in a crisis. The individuals and families who have lost benefits from programs such as AFDC or food stamps, and who do not qualify for any type of assistance, are the primary recipients of this program. Family Independence Agency (FIA) funds are supplemented by Community Services Block Grant (CSBG) monies and from donations of food from the Gleaners Food Bank. The agency provides pre-packaged food boxes (pantry pacs -- 45 pounds equals 15 meals), to customers who declare an emergency need for food. The eligibility criteria requires that customers meet and document income eligibility guidelines. Also, customers are usually served no more than once during a 90-day period. However, when customers declare and document an emergency, exceptions are made.

The food boxes include a reasonable combination of the following four food groups:(1) Meat or meat alternate group; (2) Vegetables and fruit group; (3) Bread or bread alternate group; and (4) Milk or milk alternate group. Donated foodstuffs may and are distributed when they meet the same standards of quality, sanitation, and safety as those purchased from commercial sources. Home-canned or preserved foods may not be used.

Emergency food is distributed to customers between the hours of 8:00 a.m. and 5:00 p.m., Monday through Friday, from three DHS Community Service Centers:(1) Area A, 14631 West McNichols;(2) Area C, 2424 West Grand Boulevard; and(3) Area G, 5031 Grandy Street.

Customers who are serviced under the Emergency Food Program are also informed of other supportive services which may be available to them through the Department such as clothing and low-income assistance on heating bills.

Los Angeles: One of the agencies in the City of Los Angeles, Harbor Interfaith, has two new programs that focus on promoting self-sufficiency. The first program is called Project Mobility (a welfare to work program). This program provides employment placement/counseling including free transportation, initial child care cost, and other supportive services. The second program is the Accelerated Learning & Living (ALL) which is a long-term transitional family shelter with the focus on education. These two programs' intention is to provide a bridge to self-sufficiency in order to solve the problem of hunger.

Louisville: Dare to Care has recently expanded its warehouse and cold storage space, and plans to open a Commissary Kitchen that will prepare meals in bulk and deliver them to homeless shelters, Kids' Cafes, day centers, etc.

Miami: Both the Miami Rescue Mission and Camillus House, and the Salvation Army are major providers of food for the poor and hungry. Meals and food boxes are provided free of charge. Between 1000 and 1500 meals are served daily. Those requesting assistance are referred by several agencies and all food programs are mostly funded by private donations.

Nashville: Second Harvest will begin a pilot program with Senior Citizens, Inc. by February 2001 to target under-served senior citizens who otherwise do not qualify for services because of age and/or financial restrictions.

New Orleans: The Emergency Food Box Program takes centralized information and provides decentralized assistance to over 60,000 people.

Norfolk: The Mayflower Marathon conducted during Thanksgiving week of 1999 collected 156 tons of food and $45,000 for the Food Bank of Southeastern Virginia. This collection effort lasted for three days (52 hours). The Marathon was supported by Mayflower Moving and Storage (locally A & E Storage); WVEC Channel 13 Television; WAFX Radio 106.9 The Fox; Truck Refrigeration; Hannaford Grocery Stores and a host of dedicated volunteers who "manned" the collection point in a regional mall parking lot around the clock. The donated food was distributed the Wednesday before Thanksgiving to local charities, food pantries and soup kitchens.

Philadelphia: The Delaware Valley Community Kitchen Collaborative (DVCK) is an alliance of three nonprofit organizations with a goal to promote self-sufficiency of able-bodied, low-income adults through food service job training in a commercial kitchen setting. Using donated food, DVCK students not only receive job training, but also fight hunger by producing meals for distribution through the emergency food and shelter system.

The DVCK collaboration involves a social services agency with experience in providing support services, such as counseling and child care (Southern Home Services), a major job training and placement provider (Jewish Employment and Vocational Services), and a large food rescue organization (Philabundance) with sources of donated food and close ties to the food industry. Philabundance delivers the meals prepared by DVCK students to shelters, emergency kitchens, and social service agencies; thereby increasing the number of prepared meals available to needy households in the Philadelphia area.

Phoenix: St. Mary's Food Bank in partnership with the City of Phoenix has opened a Community Kitchen/Culinary Skills training program at one of the City's Human Services Department locations. The program trains 10 to 12 homeless or welfare-to-work students in a 3 month curriculum and then places them in jobs that start at $9/hour. There has been a 90 percent success rate of people completing the program and of those completing the program, 100 percent have been placed in jobs at local hotels and restaurants.

Portland: The Oregon Food Bank recovers more than one million pounds of perishable food each year from produce wholesalers and gets that food to local distribution points. St. Vincent De Paul also recovers thousands of pounds of edible food from cafeterias through their Food Train program.

Salt Lake City: Wasatch Community Gardens operates community based gardens as a way to encourage people to supplement their diets with their own food. It has been especially helpful for immigrants to find that sense of community. A youth program involves younger people in the growing and the selling of the produce through the summer Farmers' Market. They keep any profits made through these efforts.

San Antonio: The Inner City Development agency, located in San Antonio's West Side, provides approximately 70,000 meals for families in crisis. The West Side of San Antonio is home to a large Hispanic immigrant population where the median income is one of the lowest in the city. In addition, unemployment and underemployment rates are higher than in other regions of the city; many have seasonal construction jobs where a constant biweekly paycheck is not a reality. In addition to housing a food pantry, the Inner City Development agency provides a community meeting space, along with outreach and counseling for children.

San Diego: St. Vincent de Paul feeding programs supplement income of the working poor and feed the homeless.

Seattle: Boomtown Café is the first non-profit restaurant of its kind in Washington State. Modeled after a program in Oregon called Sisters of the Road, the program is in its second year of providing nutritious meals in a dignified setting to Seattle's homeless and low-income citizens. Hungry patrons/clients pay $1.25 for the meal or $5.00 for those that can afford the full cost of the meal. No one is turned away due to inability to pay because of a work barter payment method. In addition to paying cash, clients can pay with food stamps or work 15 minutes in

exchange for one meal. The Boomtown Café was founded by a group of homeless advocates and social activists. Their dream took six years to come to fruition.
With the success of any new venture or "pilot program" comes a great deal of growth and learning opportunities. One of the successes that also temporarily set back the continued operation of the Boomtown Café is the work barter payment method. This method of working to pay for one's meal is a terrific concept. However, it has become a primary payment method for many of the patrons/clients. Due in part by necessity rather than choice, the number of barter patrons exceeded the number of patrons who paid full price. As a result, the agency had to make a difficult decision to temporarily close the program in order to assess the funding situation and to get a better financial footing in order to continue their mission. The closure actually resulted in an outpouring of positive support from the media, well wishers, and other supporters. Many made monetary contributions. By the time this report goes to print, the program will have re-opened with a more solid and consistent funding stream so that the work barter payment method can continue to be an option for people who are unable to pay cash for their meal.

St. Louis: The City of St. Louis salutes each individual and agency that assists in alleviating hunger. The 24-hour, 7-day a week Hunger Hotline, sponsored by Operation Food Search, stands out as an exemplary program.

Trenton: The Mercer Street Friends Center Food Cooperative, allows food pantries to purchase food at a minimum price.

CITY DATA ON HUNGER

City	Percent Increase in Demand for Emergency Food	Percent Increase for Families' Demand for Emergency Food	Percent Requesting Emergency Food Assistance as Members of Families with Children	Level of Resources	Food Assistance Facilities Provide		Are People Being Turned Away?	Percent of Need Unmet
					Adequate Quantity of Food	Nutritionally Balanced Food		
Boston	20	7	66	increased	no	yes	yes	10
Burlington	17	11	28	increased	yes	yes	no	1
Charleston	21	na	82	same	yes	yes	yes	0
Charlotte	6	6	23	same	no	no	no	0
Chicago	na	na	51	increased	yes	yes	no	0
Denver	10	10	60	same	no	yes	no	10
Detroit	20	30	56	decreased	no	no	no	33
Los Angeles	na	30	48	same	no	yes	no	23
Louisville	11	8	70	decreased	yes	yes	yes	20
Miami	22	22	70		yes	yes	yes	10
Minneapolis	-11	-14	85	same	yes	yes	no	0
Nashville	25	10	47	decreased	no	no	no	0
New Orleans	na	na	76	increased	no	yes	yes	10
Norfolk	13	13	80	same	yes	yes	yes	13
Philadelphia	21	20	75	decreased	no	no	no	20
Phoenix	24	20	53	increased	yes	yes	no	14
Portland	9.1	9.1	55	increased	no	yes	no	0
Providence	25	10	83	decreased	yes	yes	no	0
Salt Lake City	-36	19	50	same	no	no	no	0
San Antonio	11	11	65	increased	yes	yes	no	2
San Diego	20	35	66	increased	yes	yes	no	0
Seattle	0	0	33	increased	no	no	no	0
St. Louis	5	-1	0	decreased	yes	yes	no	0
St. Paul	na	na	0		no	no	no	0
Trenton	23	19	66	increased	yes	yes	yes	7

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Homelessness

The Problem

Emergency Shelter Requests

Seventy-six percent of the survey cities report an increase in requests for emergency shelter during the last year. Three cities – Charleston, Denver and Phoenix – report that the number of requests for emergency shelter remained the same during the last year. Portland and St. Paul report the number of requests for shelter declined during the last year.

Across the survey cities, the average increase was 15 percent. The percentage of increase requests range from 47 percent in San Antonio, 30 percent in Charlotte, 28 percent in Minneapolis, 22 percent in Detroit, 15 percent in Nashville and New Orleans, 7 percent in Salt Lake City, 4 percent in Burlington and Philadelphia, 2 percent in Chicago, and one percent in Louisville.

Among the comments from the city officials on the number of people requesting emergency shelter:

Boston: Increased to 5,820 men, women, and children during the last census. This includes all residential homeless programs and a street count.

Burlington: This number reflects homeless individuals only (not families). Among individuals, the number of homeless youth saw a significant increase, while the number of homeless adults stayed roughly the same.

Charleston: Because the homeless population has become more disabled as time passes, homelessness lasts long for some, therefore, shelters are experiencing periods when their resources are stretched. Explanations for the increased complexity of presenting problems range from: an aging population; a population that is increasingly dependent on chemical substances such as crack cocaine; the refusal of healthcare organizations to take and care for any but the most life threatening cases; mental health treatment programs that cannot handle the volume of patients nor provide resources for medication; and a lack of slots for unfunded substance abuse treatment programs.

Chicago: The percentage is roughly 2-5 percent. The response is reflective of information receive through the City of Chicago, Department of Human Services 24 hour Emergency Services Communication Center. More specifically, the demand by families experiencing homelessness has exceeded the capacity of the existing shelter system for extended periods of time this summer and fall. Additionally, there are facilities in the City which do not participate in the Clearing House System (the City's resource/service delivery tracking system). As a result, a small percentage of shelter data has not been captured.

Denver: The number of homeless, single individuals in Denver at any given point-in-time has remained around 1,700 persons over the past two years.

Detroit: A telephone survey of providers servicing a variety of populations resulted in this average reported increase.

Los Angeles: There are not enough shelters for special needs populations.

Louisville: Total number of people requesting emergency shelter has increased although the beds/units have remained approximately the same.

Miami: This estimate is based on the number of placements made by the Miami Homeless Assistance Program.

Minneapolis: The increase is due to new arrivals and lack of affordable housing.

Nashville: Increased by 54 percent. The number of available beds remains relatively constant. In the past year, the number of Shelter Plus Care rental certificates has plummeted to nearly zero. We continue to see a significant number of individuals who are exiting the jail/prison system with no permanent housing. We continue to see approximately 100 individuals who are in some state of homelessness- either on the street or living between family/relatives and friends at any point in time.

New Orleans: According to an informal poll of all emergency shelter providers (11/21/00). Eight out of 9 agencies reports a stabilization in requests and this shelter for men is usually full.

Norfolk: Data is based upon the Division of Social Service's information - July 1, 1999 - June 30, 2000. Data for the entire City is not available.

Philadelphia: 11/10/99 – 2136 in shelter11/10/00 – 2215 in shelter.

Portland: The data was collected in March of 1999 and March of 2000 because the November data is not yet available. Unfortunately, the data seems to have some reliability problems. It is important to note that the number of documented turnaways increased to 550 in March of 2000 up from 466 in March of 1999.

Salt Lake City: Housing vacancy for low income people is two to three percent.

San Antonio: A shortage of affordable rental housing and low wages continue to remain the lead causes for increases in requests for emergency shelter. Homelessness and poverty are inextricably linked. Although we are experiencing more individuals transitioning from welfare to work, only a small fraction of welfare recipients' new jobs pay above-poverty wages. Most of the new jobs pay far below the poverty line. Furthermore, the lack of affordable housing has led to higher rent burdens where tenants spend a large portion of their income on what is often substandard housing. Higher rent also lead families to live in overcrowded conditions, living in doubled up and tripled up capacities.

San Diego: The number of City emergency beds doubled in one year. Senior shelter has been planned for the first time. One week SVDP emergency shelter had 200 extra "guests."

Seattle: The One Night Count conducted on October 19, 2000 found more unsheltered people in our city than previous years (784 in 1998, 983 in 1999, and 1,085 in 2000). Part of the increase over the previous year is due to Tent City 3, an alternative shelter for homeless people established earlier this year by advocates. Approximately 100 people use Tent City each night. According to preliminary figures compiled that same night, 140 more people than the previous year were sheltered in programs located throughout Seattle (3,173 in 2000 and 3,035 in 1999). This number will increase when data are submitted for a major provider of shelter/transitional housing for large families by year's end.

St. Louis: According to our centralized intake and referral system ROSIE, which logs calls daily for emergency shelter, there has been a definite increase in calls for emergency shelter assistance.

St. Paul: The decrease is based on the counts of people staying in shelter. However, stays are longer by several days which has created a "no vacancy" atmosphere. It is believed to cause people to not even request emergency shelter.

Trenton: More homeless people are being placed in motels. We see more of our families who have exhausted their EA benefits becoming homeless.

Emergency Shelter Requests by Families

Requests for emergency shelter by homeless families with children increased in 72 percent of the survey cities during last year. Miami, Phoenix and St. Louis said that the number of requests by homeless families remained the same during the year. In 14 percent of the cities, the number of requests declined during the year.

Across the survey cities, the average increase in requests for emergency shelter by homeless families with children was 17 percent. The percentage of increased request ranged from 38

percent in Denver, 35 percent in Charlotte, 25 percent in New Orleans, 15 percent in Detroit and Minneapolis, 11 percent in Nashville, 6 percent in Salt Lake City, 6 percent in Burlington, and 3 percent in Chicago. The number of requests decreased by 20 percent in Portland, 17 percent in Norfolk and St. Paul, and 2 percent in Louisville.

Among the comments from the city officials on requests for shelter by homeless families with children:

Boston: Shelter capacity statewide has not increased. As demand increases, many Boston families are being placed by the State in hotels and motels away from the City.

Burlington: The increase last year is part of a larger picture – over the last four years, the number of homeless families has increased by 400 percent.

Charleston: The Reid House, a shelter for women and children reported maintaining waiting lists for most months during the past year. Crisis Ministries' Family Center was at capacity during three out of six months over the past year.

Chicago: The response is reflective of information receive through the City of Chicago Department of Human Services' Monitoring and Reporting System. The Department requires the completion of reports from only city funded agencies (service requests, referrals and direct service provision). The information gathered from these reports facilitates the tracking of homeless services as well as, other program trends. Additionally, there are facilities in the city which do not participate in the Clearing House System (The city's resourse/service delivery tracking system). As a result, a small percentage of the shelter data has not been captured. The response is reflective of information receive through the City of Chicago Department of Human Services 24 hour Emergency Services Communication Center. More specifically, the demand by families experiencing homelessness has exceeded the capacity of the existing shelter system for extended periods of time this summer and fall.

Denver: The number of homeless persons in families has grown from 1,256 in 1998 to 1,739 in 2000, an increase of about 38 percent.

Detroit: A telephone survey of providers resulted in this average reported increase.

Los Angeles: Several agencies reported having waiting lists.

Louisville: For many years, the turn-away rate for families was one family kept and four turned back into the street. A recent survey of three emergency family shelters found that number may have decreased to three turned away for every one kept. The fourth family shelter was not included in the survey due to renovation. It is extremely difficult to know if this number is duplicated. In collaboration with the Jefferson County Department of Human Services, the City of Louisville Department of Housing and the Housing Authority of Louisville, three relocation

apartments in the Housing Authority have been set aside for homeless families unable to get into the shelters. These units have remained filled and 13 families have been served.

Miami: Over the past two years the numbers of families requesting assistance has been fairly consistent.

Minneapolis: Rental housing costs account for the increase in families requesting assistance.

Nashville: The number increased by 11 percent because more people know of our service. During the last few months, our crisis line has had an increase in requests for beds/shelter.

Norfolk: The data is based upon the Division of Social Service's information - July 1999 - June 2000. Data for the entire City is not available.

Philadelphia: November 10, 1999, 1259 family members requested shelter; November 10, 2000, 1343 family members requested shelter.

Portland: The data was collected in March of 1999 and March of 2000 because the November data is not yet available. Unfortunately, the data seems to have some reliability problems. This may be because agencies do not report consistently and some agencies do not prioritize reporting as an activity.

Providence: Telephone intakes are conducted for each family seeking shelter.

Salt Lake City: Low wages; lack of affordable housing.

San Antonio: The increase is attributed to a growing shortage of affordable rental units and the continued wage declines in San Antonio, especially among working poor families. Wage declines can be attributed to the erosion in the value of the minimum wage, a decline in manufacturing jobs, the corresponding expansion of lower-paying service-sector employment, and increases in temporary and part-time employment. As a result of wage declines, many poor families are frequently unable to pay for housing, food, child care, health care, and education. Often times, difficult financial choices are made when a crisis occurs, which means that a poor family is merely a paycheck away from living on the streets should an illness or accident occur.

San Diego: The impact of high housing costs and EBT cards (instead of food stamp cash) reduces discretionary income. There are at least 50 percent more homeless than available beds in region.

Seattle: The One Night Count conducted on October 19, 2000 found more unsheltered people in our city than previous years (784 in 1998, 983 in 1999, and 1,085 in 2000). Part of the increase over the previous year is due to Tent City 3, an alternative shelter for homeless people established earlier this year by advocates. Approximately, 100 people use Tent City each night.

According to preliminary figures compiled that same night, 140 more people than the previous year were sheltered in programs located throughout Seattle (3,173 in 2000 and 3,035 in 1999). This number will increase when data is submitted for a major provider of shelter/transitional housing for large families by year's end.

St. Louis: Homeless families with children remains the fastest growing segment of homelessness, yet, this has not increased since 1999.

St. Paul: Counts of families are based on those who go through our Emergency Shelter System. Capacity has been restricted, therefore the numbers are down. Affordable rental units have waiting lists. People stay longer in the shelters which creates a bottle neck.

Trenton: The increase in homeless families is a result of denied Emergency Assistance.

Length of Time People Are Homeless

People remained homeless for an average of 5 months in the survey cities. The average length of time people remain homeless is 9 months in Boston and Charleston, 2 in Burlington and Trenton, 6 in Chicago, Los Angeles, Louisville, Norfolk, and Philadelphia, 3 in Charlotte, Denver, Minneapolis, Salt Lake City and St. Louis

Fifty percent of the cities report that the length of time people are homeless increased. The remaining 50 percent said that the length of time people are homeless remained the same during the last year.

Among the explanations of the city officials in the duration of homelessness:

Boston: The vacancy rates for housing is below 1 percent in some Boston neighborhoods. Between 1994 and 1997, federal funding for housing in Massachusetts was cut 12 percent, or $28 million.

Burlington: The housing vacancy rate has been below 1 percent for four years. Lack of available affordable housing has increased the length of shelter stays.

Charleston: Individuals remain in homelessness longer, due to the complexity of their presenting issues and the lack of adequate healthcare.

Charlotte: Individuals stay in shelters between 33 and 52 days.

Chicago: The length of time homeless are housed in transitional shelters has remained the same due to the unchanging causes or homelessness which require significant counseling and support.

Denver: The average length of time has remained constant between 1999 and 2000.

Detroit: A survey of shelter providers indicated that 62 percent reported an increased length of stay, while 38 percent reported that the length of time stayed the same.

Los Angeles: The length of time people are homeless has increased because of several reasons, including the fact that many shelters only allow clients to stay in the shelters for a certain amount of time. After that, they either have found a home, sent to another shelter, or end up back on the streets.

Louisville: Landlords willing to accept Section 8 certificates are difficult to find and the length of time to get into the Housing Authority of Louisville developments fluctuates from a few weeks to several months. Many times clients face barriers to getting into the Housing Authority facilities due to past history of previous evictions, poor credit or criminal records. Other clients are fearful of returning to public housing, especially those people in recovery, since the developments are where many bought or sold drugs. They would like a new start. The Seven Counties Services (regional mental health agency), The Healing Place, the Housing Authority of Louisville and other interested community stakeholders have developed a group of sober living units in Beecher Terrace, a public housing development. However, these units remain full. In the 1999 HUD Continuum of Care more funding has been requested to expand the sober living units.

Miami: Multiple shelter stays are a result of fewer secondary placements, lack of affordable housing and lack of resources for the elderly, disabled, and mentally ill.

Nashville: Veterans tend not to use available services, and stay on the streets longer. (Operation Stand Down) Housing resources are down, due to Shelter Plus Care certificates being all used up. This puts significant stress on the ease of entry into housing. CARES has experienced a 25-40 percent increase in requests for financial assistance; this has led to increased competition for funds that have not kept pace, and thus longer waits to secure stable housing. (Nashville CARES)The Campus has seen a decrease in this length of time, but also emphasizes the housing affordability crunch: "We are being very pro-active about moving people successfully into housing. Our only difficulty is finding safe low-income housing."

Philadelphia: The number of people remaining in shelter 180 days remains about the same. Severe behavioral health/medical problems and the lack of permanent housing affects the ability to move clients more quickly out of the shelters.

Portland: That number is not correctly tracked.

Providence: Lack of affordable housing, domestic violence, and no income account for the length of time people are homeless.

Salt Lake City: The time has shortened due to transitional housing opportunities appearing sooner.

San Antonio: Based on surveyed agencies, the average length of time has remained the same.

San Diego: Funding for case management is needed. Case management is key to reintegrating homeless into the self-sufficient mainstream.

Seattle: With a very short supply of affordable permanent housing options (either subsidized or market rate), the length of stay has increased for people in emergency shelter and transitional housing programs. During this year's One Night Count, several emergency shelter providers reported that more shelter users are homeless for longer periods of time. Not only is Seattle experiencing more homeless people, service providers report that the families seeking services have problems that are more intractable or have trouble finding landlords who will take Section 8. These problems are major obstacles for stabilizing families rapidly.

St. Louis: Short-term homelessness (0-6 months) has gone up, while long-term homelessness (7 months to 4 years) has gone down.

St. Paul: Single men now stay in shelters 27 percent longer and families stay 6 percent longer.

Trenton: The increase is due to lack of affordable, decent housing.

Case Studies of Homeless Families and Individuals

The city officials were asked to describe the conditions faced by an actual homeless family or individual in their city. Following are **brief case studies of homeless families and individuals**:

Boston: John (not his real name) is a homeless man in his mid-forties with chronic substance abuse, mental illness, and is HIV positive. John has used many of the emergency shelter services in the City over the last several years, as well as a program specifically for HIV positive homeless persons. John's behavior is such that he has been barred at many programs for his inability to follow basic rules. His volatility while intoxicated makes him a problematic client. Although he is well known, he is treatment resistant and often stays on the streets. Homeless service providers have attempted to coordinate services for him and will continue to do so.

Burlington: The Committee on Temporary Shelter scrambles to accommodate 18 to 22 homeless families nightly. The situation got worse last May, when local motels asked homeless

families to leave to make room for visitors arriving for the University of Vermont's commencement weekend. The University responded by opening its dorms to homeless families for the entire summer. For MaryLou Hyde, her husband and her three children, the *UVM* campus provided a welcome respite from roadside motels and shelters. Green space provided running room for the children, and the campus setting promoted a sense of community among the resident families.

Charleston: The Family Center at Crisis Ministries housed an average of 42 women and children per night. Over the past year, the number of single women with diagnosed but untreated mental illnesses has increased. A typical profile of a homeless woman in this situation is "Denise" who is in her late thirties, divorced, and a mother of two boys. The boys are in the custody of her ex-husband who has relocated to another state. Prior to moving, there was an injunction preventing "Denise" from seeing her children. Because of past incidents, the Family Court judged to be harmful to the children's well being. "Denise" is an attractive well-groomed woman who has worked as an administrative assistant and bookkeeper during her life. She suffers from delusions, which she translates as messages coming to her directly from God. While still married she was involuntarily committed to a mental hospital. After getting out of the hospital she was compliant with her medication for a short period of time. She resists taking the medication because, as she reports, she loses touch with God and feels like someone else. While living at the shelter she has been approached by staff mental health counselors and the primary healthcare staff but still denies she has any difficulty. She has no trouble getting a job but is unable to sustain employment because she sees evil spirits everywhere and is unable to control her outbursts.

Her most recent jobs have been with hotels as a maid or working temporarily cleaning office buildings. Her behavior is very paranoid; therefore, she cannot make or sustain any relationships with other guests. Since she denies her illness, treatment is not an option. When staff forces the issue, she leaves the shelter and lives in what homeless individuals call the "woods," an overgrown area close to an interstate highway. When staff makes a plan for her to exit the shelter and enter a transitional housing program she frequently loses her job and is set back until she locates another. Currently, she remains in the shelter and has been in a shelter off and on over the past six years.

Charlotte: Adult African American male, 28 years, substance abuser, high school graduate.

Chicago: Ms. 2 completed a drug recovery program in October 1999. Upon completion, she was placed into a Transitional Housing Program with three of her five children. After successfully completing a training program, Ms.2 became employed with the Chicago Park District. However, upon receiving her first paycheck, she relapsed and was placed on programmatic probation. As a result, Ms. 2 would require admission to an in-patient treatment program for detoxification. Correspondingly, she was unable to secure care of her 3 minor children. In an effort to maintain the family, the Case Management staff allowed the oldest daughter(age 19) to reside in the unit with her siblings and act as the primary care giver. Ms. 2 completed the treatment program and

was able to maintain her position with the Chicago Park District. Currently, she remains drug-free. Within the next six months, Ms. 2 (and her children) will be moving into a permanent housing unit.

Denver: Antonio is 25 years old. He recently visited a medical clinic in Denver because of stress-related medical problems that included nervousness and abdominal pain. Antonio, his wife Ali, and their two young children are homeless. Antonio earns $7.90 per hour working in a garage and is paying daily for a motel room to keep a roof over their heads. The family has applied for a variety of housing programs but the waiting lists are several years long. Most housing authorities are not accepting applications because of the long waiting lists. Antonio earns approximately $288 per week after taxes. With a modest car payment, expenses for food, and diapers, Antonio cannot afford an apartment in the area. He feels trapped in the motel because he cannot save enough for rent and deposit. He feels helpless and depressed because he feels that he cannot adequately care for his family.

Detroit: Mr. B is a 53 year old Detroit native. He became homeless in 1993 because of a family tragedy: the death of both of his parents. Mr. B. had been taking care of his parents in his home. Numerous arguments between he and his siblings became too much, and he decided to leave. He went in and out of relatives homes for years, trying to get by. He had experience as a truck driver but needed a place where he could start the process of getting back on his feet. Mr. B. became involved with the Green Industries Project through a referral from a counselor at a local walk-in center. He already loved working outdoors, and he received training which allowed him to become a Certified Pesticide Applicator. He began his employment at a salary of $18,000, with the potential of increasing to $50,000 within three to five years. Mr. B. has maintained permanent housing for about a year, and he has expressed an interest in starting his own landscaping business.

Los Angeles: The following case study is from Catholic Charities/Good Shephard Emergency Shelter for Women in Los Angeles: Cathy was a homeless mother with two young dependent children. Her children were removed from her custody because of homelessness and the father's abuse of the mother and children. Cathy entered their emergency shelter and followed the requirements of the court to regain custody of her children. She was awarded weekend custody under supervision. Cathy moved to the agency's Mother-Child residences with court approval so that she could have supervised weekend custody. She has now been granted full custody and is remaining at their home until she receives Section 8 housing for which she has applied under Good Shephard sponsorship.

Louisville: Born and raised in Louisville, Woody never thought he would be living on its streets. He graduated from high school and spent several years in the Navy before working as a van driver and auto detailing specialist. But somewhere along the way, he stumbled into the trap of alcohol and drug abuse. He managed to get by OK until his mother died in 1996. "I got depressed after she passed," he says. "I had always depended on her, and when she passed I just felt, what's the use? Nobody cares." He stayed in her house for a year, living on an insurance

settlement, but his addictions got worse and his life fell apart. Out of money and out of work, he was arrested for writing bad checks and went to jail. His jail term up, Woody had no place to live. His brother and sister talked him into enrolling in a 30-day in-patient program for substance abusers.

Even after that program ended, his living arrangements were uncertain until October 1998, when a staff member with the St. John Center told him about Harmony House, a half-way house operated by Interlink Counseling Services. Harmony House offers hope and structure for people in desperate need. "From there I learned about the disease of alcoholism and how to live my life again," Woody says. Woody progressed to two more recovery houses – another Interlink shelter on East Broadway and an informal setting on Shelby Street – before recently moving in with a lady friend. Now 44, Woody works full-time as a bus driver for TARC, providing transportation for people with mental and physical disabilities. He hopes to one day run his own auto-detailing business.

Nashville: A young veteran has been living in a camp for at least three years. A social worker started working with him. He is addicted to alcohol and has post-traumatic stress disorder. Through the encouragement of the social worker, and the veteran's desire to finally get help, he seeks treatment and moves into transitional housing. The social worker is trying to get him additional help for his PTSD.

(Operation Stand Down)On occasion, we have 2-3 persons (2 males and one female, approximate age 25 yrs.) living behind the food bank. We have offered to help, but for now they are okay. They move about town receiving meals, but do not want to be separated. They seem educated, but we guess they are in this situation due to drugs. We have provided cans of food, can openers, juice, bread and fruit, and referred them to congregate meals.

(Second Harvest) In our Homeless Day Treatment Program, the prototype is a male African-American, with multiple diagnoses that include HIV/AIDS, substance abuse (crack cocaine and alcohol), and often a tertiary diagnosis of mental illness. Many have a criminal background related to their substance abuse. Most have tried unsuccessfully to get and remain alcohol- and drug-free. Many have sporadic employment history and have been in and out of housing. All work off and on with case management to secure and maintain housing and other resources; this is disrupted by chemical use. (Nashville CARES)

New Orleans: When Josie first sought help, she suffered from Post Traumatic Stress Disorder and years of substance abuse problems. She is a U.S. Veteran who had become homeless and lost custody of her only son. With the help of local agencies under the UNITY continuum of care umbrella, Josie received shelter at a residential treatment program, mental health services and life skills training and employment counseling. Today, Josie is gainfully employed at a medical facility, is meeting all her goals to be self-sufficient and drug free and has renewed contact with her son. After completing her aftercare programs, she will be ready to move into her own apartment.

Norfolk: Women in Crisis successfully assisted a twenty-eight year old mother of two achieve self-sufficiency. She came to the program because she and her eight-year old autistic daughter were being abused. She could not identify any family or friends who could help her. As a result, she found herself with only two options: become homeless or stay in the abusive relationship. Finally, she left her abuser and entered the shelter. She struggled with traveling forty-five minutes to an hour to work every day via public transit. Despite her obstacles, she was able to find strength from within and moved out on her own with her children to a very nice two-bedroom apartment. She was able to move much closer to her job. Mother and daughter were linked to services that would help them both deal with the daughter's behavioral problems. The woman and her two children are presently signed up for follow-up services through the shelter's aftercare program and are doing well.

Philadelphia: Ms. C is a forty-two year old Caucasian female, mother of 3 children, and a divorcee. Two of her children are adults. Ms. C has been in shelter with her thirteen-year-old son since March 2000. She receives SSI for herself and her son. Her oldest daughter is her son's representative payee. Ms. C is a high school graduate, attended college for one year, and has a limited work history, which includes factory work. Ms. C entered the OESS shelter system because she got behind in her mortgage payments and was evicted from her property by the sheriff. She is a victim of domestic violence and she obtained her divorce in May 2000, along with a protection order for one year. Ms. C denies having a substance abuse history; however, she receives treatment for a bi-polar disorder. In addition, she has been diagnosed with several medical problems. Among them are hypertension, irritable bowel syndrome, heart palpitations, and migraine headaches. Her thirteen-year-old son has been diagnosed with ADHA and a bi-polar disorder, and is under treatment for these.

She has been assigned a Department of Human Services child protective worker who indicates that Ms. C has not been consistent with obtaining the prescribed treatment for herself and her son nor has she been cooperative in working with DHS. She has been non-compliant with the agency's requirements for shelter fee and savings payments. As a result she has been placed on a service plan contract to address this issue. She is also scheduled to receive more intensive assistance and support. Should Ms. C maintain compliance with the service plan contract terms, she will become eligible for transitional housing.

Phoenix: John, a 15 year old and his mother and stepfather have been homeless for at least 5 years, off and on. They are currently living in a camper shell behind a business which lets them stay there. Child protective services has been involved with the family. The mother works and the stepfather is in and out of the family. The mother has other children who have been removed by CPS. Domestic violence is an issue with the family.

Portland: A woman with 4 children ranging from ages 3-8 was living in a van with her abusive spouse. During the course of this relationship, she had become increasingly isolated from other members of her family, including her mother. Neither she nor her husband wanted to seek services. Through a camper outreach program, a social service agency came across the parents

and children and gradually developed a relationship. After two months, the woman agreed that the best thing to do was to leave her husband and move herself and her children into a family shelter. Ultimately, she was able to reconnect with her mother who provided her with some additional assistance. With that assistance, and some help from the social service agency that had originally contacted her, she moved into her own open market apartment and was able to get a job. She is currently living in her apartment and supporting her children, with ongoing childcare assistance from her mother. The social service agency is putting together a Christmas celebration for the family.

Providence: A single, white mother of three children, 24 years old and receiving public assistance of $7,548 per year (cash). She has a 9th grade education. She was living in housing that exceeded her budget and following an eviction spent about two weeks homeless before being accepted into a shelter. She receives no child support and struggles with personal problems such as depression, medical issues, drug/alcohol abuse, mental health issues, domestic abuse, and sexual abuse.

Salt Lake City: A dual parent family with 4 children lost their housing due to substance abuse of parents. A case plan for parents placed them in drug rehab programs, entered the children in school, entered the parents in employment programs. The family is now in transitional housing. The father is working as a cook and the mother is beginning an educational program.

San Antonio: Diagnosed and treated periodically for personality disorders and mental illness, coupled with addictions, a middle aged single woman with a history of childhood trauma including torture, rape, other sexual assaults, starvation, assault and confinement; lives on the streets and intermittently in flop houses and shelters for over a twenty year period. The woman attempted suicide on more than one occasion. She has several debilitating medical conditions, and was unable to sustain contact with any helping agency long enough to receive help or disability and become stabilized. With collaboration between the Family Violence Prevention Service's Community Based Counseling Program, which provides counseling therapy and the Continuum of Care, she is stabilized enough to take medications and to participate successfully in obtaining Social Security assistance. For approximately nine months, she has lived on her own while maintaining an apartment. There is evidence that she will continue to progress.

San Diego: In order to make ends meet, the homeless must supplement income by using all available social service resources possible.

Seattle: Jessi (false name) has been a client of YouthCare (a local non-profit organization serving homeless youth and young parents) for 3 years. She was a PRO Youth Peer Leader (PRO Youth is a McKinney-funded case management program for homeless youth) for a year and a half. She lives at Straley House (a transitional home for young adults) and is working on her AA degree at Shoreline Community College through the CEO program. She brought in this poem to share with the YouthCare staff:

"YouthCare Saved My Life:" Once upon a time a heavy addiction got a hold of me. I looked at my mother, saw how I could turn out and set out for a better path. That's when I found a little triangular building on the corner of Boren, Fairview and Virginia Streets. One day I was hanging out in downtown Seattle and a pimp walked up to me and told me I could stay in nice hotels and have anything I wanted if I went with him. I politely said 'no' and told him I had a place to stay and walked away. I was walking around one day and some one pulls up next to me and says, 'Hey, let's go for a spin.' I said, ' Maybe if you didn't have a screwdriver for a key.' Everyday when I get home and lay in my bed I end my day feeling lucky because I lay in my bed safe. I have no worries about falling asleep. Sometimes I look back to see what could have been and the conclusion's always the same: YouthCare saved my life." by Jessi.

St. Louis: This individual is an African-American female aged 38 with 2 children. Her children are in foster care. She has been homeless for about six months and has a history of mental illness, yet she is employed and compliant with her medication. She is currently residing in emergency shelter, but wants desperately to regain custody of her children. Though not quite prepared for the move into transitional housing, according to her mental health counselor, her need for assisted living where she can provide family life for herself and her children is paramount. There is no housing available.

St. Paul: Jane had an apartment and paid her rent but had to move because of planned renovations. The replacement apartment that she found was not ready on time and her welcome was worn out at her friends place where she was during the interim. She and the 5 kids moved to her car. Without any safe place to leave the kids, she lost her job. She moved to a Church Basement shelter, then to a County facility. She was unable to find a place in the 30 days afforded by the County facility. Now she and the children are headed back to the Church Shelter. There is no resolution in sight. She is temporarily on welfare but the grant for a family of six is too small to rent even a cheap one bedroom in our city.

The Population

Across the survey cities it is estimated that single men comprise 44 percent of the homeless population, families with children 36 percent, single women 13 percent and unaccompanied youth 7 percent. Sixty-three percent of the homeless families in the survey cities are headed by a single parent.

Survey city officials estimated that 50 percent of the population is African-American, 35 percent is white, 12 percent is Hispanic, 2 percent is Native-American and one percent is Asian.

It is estimated that persons considered mentally ill account for 22 percent of the homeless population in the survey cities; substance abusers account for 37 percent. Twenty-six

percent of the homeless in the survey cities are employed in full-or part-time jobs. Fifteen percent are veterans.

Services for Homeless People

Emergency Shelter Beds for Homeless People

Across the survey cities, the overall number of emergency shelter beds for homeless people is estimated to have increased by 15 percent last year. The number of emergency beds increased in 52 percent of the survey cities.

Among the comments from the city officials on the number of emergency shelter beds for homeless people:

Burlington: This number represents beds for individuals.

Charleston: This number is based on shelter beds within the city limits of Charleston.

Denver: Twelve hundred and ninety shelter beds are currently in use in the city for use by homeless people. The number of emergency shelter beds increased by 31 as temporary shelter for homeless single women. However, this program is a temporary seasonal shelter and cannot be counted as permanent emergency shelter. Twelve hundred and ninety is our maximum capacity. When the temperature is more than 40 degrees, shelters are not providing overflow beds, so their capacity reduces to 1,158.

Louisville: The shelter providers, the Coalition for the Homeless, city and county governments are committed to not expanding emergency shelter beds. We have plans for two safe havens, one for women and one for men, but we are committed to more outreach services and permanent supported housing.

Nashville: This increase was solely due to the expansion at the YWCA Domestic Violence Shelter. No new emergency shelter beds for individuals have been added, although we are due for an increase in this number when the Rescue Mission completes its new facility next year.

Phoenix: Our data is based on information obtained by the Continuum of Care process in Maricopa County.

San Diego: Winter shelter is the primary source of emergency beds from December 15 to March 15 only.

Seattle: This figure represents beds and hotel/motel vouchers.

St. Paul: One hundred forty(140) of these beds are available from November to April and then closed in the summer.

Trenton: This is a Winterization Overflow program.

Emergency Shelter Beds for Homeless Families

Across the survey cities, the average increase in emergency shelter beds for homeless families was 26 percent. Phoenix and Trenton said the number declined.

Among the comments from the city officials on the number of emergency shelter beds for homeless families:

Burlington: The number of shelter beds for families went from 39 to 89. A local college has closed and leased a dorm to the Committee on Temporary Shelter for homeless families. According to the State agency which provides emergency housing, an average of 16 families are housed in motels during any given month.

Chicago: The percentage is actually 16 percent.

Denver: There are 316 total number of shelter beds for families, including domestic violence beds. There are a total number of 106 family rooms or units in the city.

Nashville: The local YWCA domestic violence shelter moved into a new facility that expanded their bed space by 250 percent. Once able to provide shelter to just 16 people, they now offer shelter to up to 56 women and children.

New Orleans: Compared to last year's report, the number of emergency shelter beds for families increased slightly this year due to an increased capacity from one agency to serve additional families.

Philadelphia: The slight increase is due to a small increase in demand for family beds.

Phoenix: Our findings is based on information obtained by the Continuum of Care process in Maricopa County.

Portland: Additional church based shelter beds outside the metropolitan area have been developed. Also, this community had made the decision to invest in housing for families, not shelter. However, a recent planning effort has resulted in a new interest in developing additional

shelter capacity for families, so that in future years there may be an increase in the number of beds available.

San Diego: Winter shelter provided 200 beds last year and 150 beds the year before.

Seattle: This figure represents beds and hotel/motel vouchers.

St. Paul: Eighteen of these beds were available only during winter months.

Trenton: We had a shelter that stopped receiving homeless families.

Transitional Housing Units

The number of transitional housing units **increased overall by an average of 38 percent across the survey cities during last year.** Forty-four percent of the cities registered an increase in transitional housing units: Charleston, Chicago, Detroit, New Orleans, Philadelphia, Phoenix, Providence, Salt Lake City, San Antonio, Seattle and Trenton.

Among the comments from the city officials on the number of transitional housing units:

Burlington: This number does not include units for homeless families.

Chicago: The percentage is actually 12.5 percent.

Miami: There are additional units coming on-line for individuals and families in 2001.

New Orleans: The number of transitional housing beds increased mainly due to the discovery of four faith-based treatment programs which house homeless persons with substance abuse problems. This was due to a categorical re-configuration in which some agencies were moved from the emergency shelter or permanent housing category to the transitional housing category. This resulted in an increase in transitional housing beds and a slight decrease in permanent housing beds.

Phoenix: The increase is due to additional beds for victims of domestic violence and funding from the Supportive Housing Program.

Seattle: This figure represents youth/young adults, families, teen parents, and single adults.

Trenton: There is a new youth transitional housing program. More transitional beds for homeless families were made available by a local nonprofit.

The number of transitional housing units specifically for homeless families increased overall by an average of 40 percent during the last year. Thirty-eight percent of the survey cities registered an increase in the number of transitional housing units specifically for homeless families during last year: Charleston, Chicago, Detroit, Philadelphia, Phoenix, Salt Lake City, San Antonio, Seattle and Trenton.

Among the comments from the city officials on the number of transitional housing units specifically for homeless families:

Charleston: The Continuum of Care Grant process resulted in an award for the development of family transitional housing.

Chicago: The percentage is actually 13.4 percent.

Nashville: One living unit at Renewal House was taken off-line to create additional program space.

New Orleans: This decrease is due to several agencies decreasing their capacity to serve families.

Seattle: This figure includes families including teen parents.

Single Room Occupancy Units

Single room occupancy units increased by an average of 11 percent across the survey cities. Seven cities reported an increase in the number of SRO units: Burlington, Denver, Detroit, Nashville, Philadelphia, Seattle and Trenton.

Among the comments from the city officials on the number of SRO units:

Charleston: We are currently exploring HUD's Safe Haven Project and the feasibility of developing this type of resource for our community.

Denver: SRO or other permanent housing units for homeless people in the city increased by 88. The total number of SRO units is 204. The total number of other permanent housing units is 368. The total number of SRO and permanent housing units is 572. The increase was in permanent housing units for homeless families.

Miami: There are more SRO units scheduled to open in the year 2001.

Nashville: Urban Housing Solutions completed rehab on a 61-unit complex, and the Rescue Mission opened its 40-bed SRO called the Lodging Place. One hundred twenty units are HUD

SRO; 40 new SRO units (not funded by HUD) opened at the Nashville Rescue Mission. In addition, there are 630 other units of permanent housing specifically for homeless people in Nashville (a total of 790 units of permanent housing).

Phoenix: There are 1671 SRO and permanent supportive housing units in Maricopa County. This is an increase, but the percentage is unknown.

Portland: Portland has made a policy decision to build small studios instead of SRO's for homeless single adults.

Salt Lake City: Our data includes short term motels.

San Diego: Three SROs are being torn down for redevelopment and will not be replaced with other affordable housing units.

Seattle: There are 1,139 SRO units specifically targeted for homeless single adults in Seattle. In addition to but not included in the percentage increase calculation are Shelter Plus Care units. A majority of the 483 Shelter Plus Care units in Seattle/King County are located in the City of Seattle. The number of SPC units has decreased when one of our SPC grants was not funded in the 1998 McKinney competition.

Family Break-Up A Requisite for Shelter

In 52 percent of the cities, homeless families may have to break up in order to be accommodated in emergency shelters. Among the city officials' explanations for families having to break up in order to be sheltered:

Boston: Pine Street Women's Inn reports that some women will leave their children with friends or relatives in order to stay at Pine Street's adult shelter.

Charleston: The Family Center at Crisis Ministries is the only facility that allows families to remain together for shelter.

Charlotte: Only 22 beds are for intact families.

Chicago: While there are only a handful of shelters in the city that are able to accommodate two-parent families (which is always the first avenue pursued), the Chicago Department of Human Services makes every effort to increase the number by placing priority on funding shelter programs for two-parent families. However, the fact is that some shelters are dormitory in style which precludes the inclusion of adult males and older male children. It should be noted that other agencies are able to provide shelter to two-parent families through different physical accommodations within a single building or compound. Another complicating factor is that

transitional housing programs, which are mostly provided through apartment setting, do not accept clients directly from the street but rather from transitional shelter referrals.

Denver: Occasionally a family with an older male youth will have to split up. In addition, there is a lack of units for homeless couples without children. Couples will often have to split up in order to receive shelter and many choose to sleep on the street instead. A couple of shelters only serve women with children, as a result sometimes the husband will have to split up from the family.

Detroit: Generally, homeless families do not have to break up because most of the family heads are females and the family-oriented shelters are geared toward female headed households. However, there are occasions where male youth over a certain age (11-13) are not allowed in family shelters, which can result in difficult placements.

Los Angeles: Families have to be separated for various reasons including domestic violence, shelters serving only one particular population, or children may not fall within the age limits of the shelter.

Louisville: Many times an older male or the father in a family must stay in the men's shelter. Families are sometimes encouraged to find a place for the children, who can go to the emergency shelter for children; women go to the single shelter and the men to the men's shelter. Families are afraid that they will be reported to Child Protective Services and the children will be removed from their custody.

Miami: Two of the five major shelters for families do not accommodate intact families. The other three may separate husbands for a brief period of time.

Minneapolis: There is an age restriction in some shelters.

Nashville: Families are often forced to break up in order to receive shelter. The largest shelter for families in Nashville asks fathers to sleep in a mission approximately 2 miles away from where the family is sheltered. Of the remaining two family shelters, one does accept men and older boys; the other takes mothers, fathers and minor children only. Available beds at these two shelters are limited. One of the small domestic violence programs does not admit boys over 11.

New Orleans: The emergency shelters in our city have a limited number of beds and, at times, are unable to accommodate the larger homeless families or intact families. This results in the families having to split up with the men going to one shelter and the women and children going to another facility.

Norfolk: Most shelters keep the family together as a unit while others allow family members of the same sex to stay together.

Philadelphia: On a rare occasion a man may have to be separated from his family temporarily in a men's shelter until an appropriate vacancy can occur to reunite the family. We continue to add appropriate shelters to accommodate the entire family unit.

Phoenix: Some shelters are unable to provide accommodations to families with male children over 11 years of age. Men and women are separated if they do not have children with them.

Portland: Only in the case of some domestic violence shelters which do not take male children. Also, there are no shelters for childless couples.

Providence: Certain shelters separate according to gender.

Salt Lake City: Travelers Aid Society will take in single or dual parent families, but Marillac House takes only women and their children.

San Antonio: The majority of agencies have programs which target a certain segment of the homeless population. For example, women and children only facilities have age restrictions imposed on the youth.

San Diego: On occasion, but rarely.

Seattle: Sometimes teenagers in families go to youth shelters when family shelters are full due to lack of capacity or when the program does not accept teenage males in their programs.

St. Louis: In some cases, when the male member of the family unit is not the husband or father of the children, he may not be able to reside with the family in emergency shelter. There are also instances where teenage boys over the age of 17 may not be allowed to reside in family shelter.

St. Paul: Not breaking up assumes that each of the adults is a parent to at least one of the children. Otherwise, the family grouping breaks up.

Trenton: It all depends on the availability of beds space.

Limitations on the Use of Shelter Facilities/ Alternatives During the Day

Officials in 44 percent of the survey cities report that homeless families may have to leave shelters in which they are staying during the day. The rest of the survey cities homeless families do not have to leave shelters in which they are staying during the day. Among the city officials' comments on the necessity of leaving shelter and where homeless people go during the day:

Boston: Generally, no.

Charlotte: We provide daycare in two facilities for children.

Chicago: Homeless families residing in Transitional and Second Stage shelters are never required to leave during the day. Only individuals residing in overnight shelters are required to pursue other opportunities.

Denver: They go to day shelters, to work, to look for employment if they are not working, to doctor appointments, or to Human Services, Social Security offices, or food banks.

Miami: The major shelters that house families do not require the family to leave during the day. One small shelter for single women and single parent (mother) families close between 7:00am and 4:00pm. Many of these individuals utilize a women day center available in the community during that time.

Nashville: Two out of the 3 family shelters provide shelter for only 12 hours during the evenings. During the day, children are to be in school; parents need to look for employment, go to work, attend GED/training classes, look for housing, apply for benefits, etc. The Nashville Family Shelter stays open on weekend days, when volunteers can be found. Some family members from this shelter stay during weekdays at a nearby community center. Homeless families must seek day shelter wherever they can find it. There are a few day shelters in the city. However, they are frequented by many single men who may intimidate homeless families. Some return to the streets; others go to job interviews or seek other social services.

New Orleans: There are only two emergency shelters for families that allow them to stay during the day. The majority of family shelters require the families to leave during the day in search of employment, shelter vouchers, other assistance, etc.

Philadelphia: OESS' policy is that clients/families are not to be required to leave their shelter during the day. Families are to leave if they have appointments elsewhere, are employed or are engaged in training for employment, life skills, parenting, etc., and to take children for walks or other recreational activities.

Phoenix: Adults must be working, seeking employment, or arranging benefits. Children must be with parents, in child care, or in school. When people are ill, exceptions are made.

Portland: During the winter months, many homeless families leave the church-based shelters and access the county funded day services at the Salvation Army. One shelter does provide day service.

Providence: Most single men/women shelter require that clients leave during the day. One family shelter requires that clients leave for the day.

San Antonio: Sixty percent indicated that clients are not required to leave shelters during the day. 40 percent indicated that clients are required to leave shelters during the day. The rules of the shelter determine whether a family leaves the shelter during the day. Most shelters do not have these rules, but the agencies that do ask families to leave in order for them to secure housing, employment, and other necessary assistance to move to permanent housing.

Seattle: Many families are participating in work search or TANF requirements or looking desperately for permanent housing and childcare.

St. Louis: There are both night and day shelters which may require individuals to leave. Because our shelter system is a service-enriched one, most individuals leave shelter during the day to pursue educational opportunities, job training, mental health and substance abuse counseling, life skills training and other support services arranged by Shelter case managers.

St. Paul: This is true for some shelters, but not for the largest family shelter which is run by the county.

Trenton: We encourage families to seek permanent housing during the day.

Funding

During 2000 where city government spent public funds (either locally generated revenues or federal or state grants) to support homeless service efforts.

Approximately 228,720,100 was used by the survey cities for homeless services during the last year. Locally generated revenues accounted for 14.39 percent of these funds, state grants for 27.77 percent, McKinney Homeless Assistance funds for 28.32 percent, the Community Development Block Grant for 9.12 percent, the Community Services Block Grant for 3.12 percent and other federal funds or other sources for 17.28 percent.

Cities that used **locally generated funds** to support homeless services:

Boston	4,500,000
Burlington	37,500
Charleston	55,000
Chicago	5,434,000
Denver	525,000
Los Angeles	500,000
Louisville	90,980
Miami	1,750,000
Norfolk	161,906
Philadelphia	15,163,334

Phoenix	615,000
Portland	1,787,547
Providence	15,000
San Antonio	43,592
Seattle	1,325,916
St. Louis	775,000
Trenton	125,000

Cities that used **state grants** to support homeless services:

Boston	44,000,000
Chicago	4,270,455
Denver	12,700
Detroit	400,000
Los Angeles	554,656
Philadelphia	10,823,687
Phoenix	82,000
Providence	1,092,830
St. Louis	75,000
St. Paul	1,500,000
Trenton	705,000

Cities that used **McKinney Act funds** to support homeless services:

Boston	12,000,000
Charleston	242,705
Chicago	14,027,806
Denver	1,291,640
Los Angeles	155,500
Minneapolis	700,000
Nashville	2,991,800
New Orleans	5,671,500
Philadelphia	3,462,060
Phoenix	4,200,000
Portland	195,666
Providence	276,000
Salt Lake City	95,000
San Antonio	4,404,618
Seattle	7,259,355
St. Louis	7,233,068
St. Paul	354,000
Trenton	206,000

Cities that used **Community Development Block Grant funds** to support homeless services:

Boston	1,000,000
Burlington	60,400
Charleston	25,000
Chicago	2,438,338
Detroit	3,000,000
Los Angeles	6,994,293
Louisville	156,000
Minneapolis	2,100,000
New Orleans	50,326
Norfolk	170,000
Philadelphia	1,152,412
Phoenix	277,000
Portland	2,179,497
Providence	15,000
St. Louis	1,249,400

Cities that used **Community Services Block Grant funds** to support homeless services:

Boston	450,000
Chicago	233,321
Denver	328,800
Los Angeles	5,700,000
Providence	30,000
Salt Lake City	133,000
San Antonio	123,925
St. Louis	147,000

Unmet Need

Estimated Requests by All Homeless People for Emergency Shelter Which Go Unmet

An average of 23 percent of shelter requests by homeless people are estimated to have gone unmet during the last year across the survey cities. Estimates of unmet requests range from 66 percent in Phoenix; 40 percent in Minneapolis; 36 in Los Angeles; 30 in Denver, 23 in Detroit, 10 in Burlington, 5 in St. Paul.

An average of 27 percent of the shelter requests by homeless families are estimated to have gone unmet during the last year in the survey cities. Estimates of unmet family requests range from 66 percent in Phoenix, 65 in Portland, 45 in Salt Lake City, 33 in Denver, 25 in Los Angeles and Louisville, 16 in Charlotte, 3 in St. Paul, and 2 in Chicago.

People Turned Away from Emergency Shelters

In 68 percent of the cities emergency shelter may have to turn away homeless families due to a lack of resources.

Among the comments from the city officials on emergency shelters having to turn away homeless families in need because of lack of resources:

Boston: The State's Department of Transitional Assistance controls access to the family shelter system. The eligibility requirements are restrictive and punish working families who are deemed "over income." The City has used Emergency Shelter Grant money to create beds for these ineligible families.

Burlington: Homeless providers have expanded their capacity to ensure that no family is forced to sleep in their car or on the street. When homeless service providers are not able to provide shelter, they advocate for Emergency Assistance from the Vermont Department of PATH to pay for up to 80 days at a motel (up from 28 days last year) to ensure time to find housing. Victims of domestic abuse are accommodated in safe houses when the confidential shelter is full.

Charlotte: We assume they live with families and have funds.

Chicago: The City of Chicago operates not only a 24-hour emergency care system but also operates a 24-hour communication center which acts as a clearinghouse for shelters that are full or have empty beds. Any shelter (or homeless person) can call the communication center to receive or make referrals. In addition, the city employs staff (mobile assessment teams)which provide on site counseling, referrals (including family and friends), placement and/or transportation. Emergency Shelters are consistently at or exceed capacity. While Warming Centers have been expanded to meet the increased demand, a more service intensive shelter approach would be more appropriate and effective. Even with expansion, CDHS has had to temporarily open overflow emergency shelter beds to meet the high demand for service to homeless families. In addition, expanding transitional and permanent supportive housing options are hampered by lack of resources.

Denver: According to our emergency shelter helpline up to 50 percent of families calling requesting emergency shelter are not housed upon first contact. The total percentage of families that cannot be eventually placed is approximately 33 percent. Approximately 32 percent of those referred for hotel/motel vouchers are not eligible and must keep searching for available beds.

Detroit: There are instances where homeless families cannot be accommodated due to a lack of beds. In many instances with families, these are households immediately threatened with eviction, as opposed to those already on the street. In some cases, prior to the eviction, beds either become available or shelters will do what they can to make additional accommodations available. In most instances, shelters will refer families to other facilities for placement.

Los Angeles: Families are referred to other shelters or receive vouchers to hotels/motels.

Louisville: Homeless families who cannot be accommodated in shelters are referred to Jefferson County Department of Human Services. Social workers evaluate the families' needs and, if they can stay where they are with support such as food, supplies, clothing, etc., these necessities are provided. If they are sleeping out or in a car or other unsafe place, they can be housed in one of the Housing Authority of Louisville's relocation apartments for 30 days receiving comprehensive case management. One thousand, one hundred (1,100) individuals have been assessed from September 1999 through February 2000. To date, 13 families have been placed in the relocation apartments.

Miami: The Miami Homeless Assistance Program always has a waiting list for families. Many of the families waiting placement in shelters temporarily stay with friends or relatives and in some instances temporary emergency motel funds are available.

Minneapolis: Hennepin County refers clients to private shelters and provide housing vouchers when shelters are full. Hennepin County also supports a safe waiting facility for overload nights.

Nashville: The Nashville Family Shelter receives many more calls for shelter in a month than it can accommodate (30 calls for 1-2 admissions). Many families circulate between family, friends, co-worker, motels, campgrounds and cars until shelter is obtained.

New Orleans: Emergency shelters report an increase in the number of families seeking assistance. The shelters are usually at capacity and must turn families away due to lack of available bed space.

Norfolk: Demand exceeds available resources. Some families turned away may be accommodated by another shelter provider. Some will continue to live in cars or on the street while others may be housed for a night in hotels.

Phoenix: About 1/3 of the need for shelter is met.

Portland: Families will camp outside or double up with family members or friends, jeopardizing that housing as well. Sometimes, families will return to violent situations to stay off the street.

Providence: If families are turned away they are required to remain in stable situations such as sleeping from house to house or they continue living in substandard housing situations such as no proper utilities, rodents, and lead hazards.

Salt Lake City: Those turned away are referred to winter shelter and put up in motels; but, some stay in cars or double up with friends.

San Antonio: Sixty-six percent of agencies surveyed indicated that they have turned away families and referred them to other agencies. Some families who are turned away sleep in cars, parks and under bridges. They also stay with other family or friends in doubled and tripled up capacities, usually in substandard housing. This is a quick solution that does not resolve the families' homelessness as they cannot receive the support they need to move to housing and are forced to wait until shelter space is available.

San Diego: Our focus has been to provide service-enhanced transition vs emergency beds. Winter shelter is the largest source of emergency beds.

Seattle: Our community cannot keep up with the requests for emergency shelter, transitional housing or affordable permanent housing. Homeless people sleep in cars, in parks, double up with other family members or sleep in places not fit for human beings. Homeless refugee families continue to find space on the floor of the local community centers due to the lack of housing for these large intergenerational families. We continue to find unsheltered children on the streets of Seattle; this year's One Night Count conducted on October 19th identified 47 unsheltered children, including teenagers.

St. Louis: In many cases, when families are not accommodated in city-contracted shelters, they are then referred to faith-based shelters, reside doubled-up with family or friends and/or low-cost motels.

St. Paul: In our case it is a lack of space. Families usually wind up with acquaintances that really do not want them. In summertime many stay in cars or tents. It is rumored that a large number move to Minneapolis and their shelter system.

Trenton: They are placed in motels and local churches with space for the homeless.

In 56 percent of the survey cities, emergency shelters may have to turn away homeless people other than families because of a lack of resources.

Among the comments from the city officials:

Boston: While many shelters have been at overflow during much of the year, capacity is added during winter months.

Chicago: The City of Chicago operates not only a 24-hour emergency care system but also a 24-hour communication center which acts as a clearinghouse for shelters that are full or have empty beds. Any shelter (or homeless person) can call the communication center to receive or make referrals. In addition, the city employs staff (mobile assessment teams)which provide on site counseling, referrals (including family and friends), placement and/or transportation. Despite the system which has been established to safeguard against such occurrences, some shelters do turn away clients because of a lack of resources. Some shelters are not equipped physically or financially to deal with the homeless mentally ill, who are acting out, or people under the influence of mind altering substances. Some of these individuals are accommodated at detox centers. Others are referred to hospitals or to the Police Department, who in turn contact the Chicago Department of Human Services for placement assistance. At times the shelters for homeless individual also exceeds demand, although not as frequently as with families. The city has developed a seasonal Warming Center approach, for individuals, to provide greater shelter resources in the winter season.

Denver: There is adequate shelter space for homeless men but not for homeless women. If they are unable to obtain motel vouchers, they seek shelter in the doorways of buildings, in post offices, bus stations, and other businesses where they will not be immediately asked to leave.

Detroit: During the winter months city-funded Warming Centers operate, which help alleviate this situation.

Los Angeles: Homeless individuals are referred to other programs or shelters.

Louisville: Single women may also experience being turned away from a shelter due to a lack of beds. The single women population has increased by 15 percent.

Miami: Same as above, with the exception that in some instances single individuals sleep on the streets.

Minneapolis: Safe waiting has become full in the last year.

Nashville: There are times when the Room in the Inn program (operates November-March only) must turn people away; this tends to be on nights when it does not have its full complement of congregations offering beds. The Nashville Rescue Mission does not turn individuals away from services. However, several factors must be considered: 1) Many homeless individuals will not access certain resources; 2) Several individuals are no longer able to use certain services; and 3) There is a nominal cost for some of the services at some agencies. (An example is The Salvation Army's Men's Lodge, which charges a fee of $8/night.)

New Orleans: The same situation exists for homeless persons without accompanying family members. Shelters are usually at capacity and are forced to turn people away due to lack of available bed space. The number of emergency shelter beds stayed the same this year; however, the increase for emergency shelter increased. Homeless persons who cannot be accommodated

in a shelter must sleep in places such as the street, abandoned houses, the woods, etc. Many of these persons are arrested for violating municipal ordinances and end up in jail.

Norfolk: The demand for shelter exceeds available resources. Individuals and families will continue to live in cars or on the street. Limited funds are available to purchase shelter in hotels/motels.

Phoenix: About one-third of the need for shelter is met.

Portland: Homeless people who cannot access shelter will camp outside. During the winter months, most people can access shelter, however, shelter may simply be a place to sit in a mission next to a room full of other sitting men. During the summer months the wait to access shelter is approximately one month.

Salt Lake City: Unemancipated homeless youth go the Homeless Youth Resource Center; single people sleep in camps, under viaducts; winter overflow for families, men, women although there is a waiting list for single women.

San Antonio: Smaller emergency shelters refer clients to the larger emergency shelters once they reach capacity. Also, community centers are utilized for emergency shelter when need arises.

San Diego: Our focus has been to provide service-enhanced transition vs emergency beds. Winter shelter is the largest source of emergency beds.

Seattle: The annual One Night Count identified 1,085 unsheltered people in Seattle. This is an increase over last year when 983 people were reported during the One Night Count.

St. Louis: The City of St. Louis does offer several outreach programs aimed at individuals with long-term homelessness. Many of these special needs homeless utilize the Department of Mental Health sponsored Empowerment Center. The Empowerment Center is a safe place for short-term shelter and a place to take care of basic needs such as shower and laundry. Runaway, homeless teens are able to utilize Covenant House and other identifiable safe houses such as Fire Department Engine Houses. Others still choose areas not suitable for human habitation such as vacant and derelict buildings.

St. Paul: Abandoned cars, caves, cardboard shelters, vacant buildings become their home. Shelter users tell us that they use a variety of options.

Trenton: They are placed in motels and local churches.

Causes of Homelessness

A number of diverse and complex factors have contributed to the problems of homelessness in the survey cities. Many of these factors are interrelated. Listed in order of frequency, the following causes were identified by the cities in response to an open-ended question: lack of affordable housing, low paying jobs, substance abuse and the lack of needed services, mental illness and the lack of needed services, domestic violence, poverty, and changes and cuts in public assistance.

- **Lack of affordable housing** was identified as a major cause of homelessness in 24 cities: Boston, Burlington, Charleston, Charlotte, Denver, Detroit, Los Angeles, Louisville, Miami, Minneapolis, Nashville, New Orleans, Norfolk, Philadelphia, Phoenix, Portland, Providence, Salt Lake City, San Antonio, San Diego, Seattle, St. Louis, St. Paul and Trenton.

- **Low-paying jobs** were identified by 19 cities as a primary cause of homelessness: Boston, Burlington, Charleston, Chicago, Denver, Los Angeles, Louisville, Miami, Minneapolis, Nashville, New Orleans, Norfolk, Philadelphia, Portland, Salt Lake City, San Antonio, San Diego, St. Louis and Trenton.

- **Substance abuse and the lack of needed services** were identified by 18 cities as a primary cause of homelessness: Boston, Charleston, Charlotte, Chicago, Denver, Detroit, Los Angeles, Louisville, Miami, Nashville, New Orleans, Norfolk, Philadelphia, Phoenix, Portland, Salt Lake City, St. Louis and Trenton.

- **Mental illness and the lack of needed services** were identified by 16 cities as one of the main causes of homelessness: Boston, Charleston, Charlotte, Denver, Los Angeles, Louisville, Miami, Nashville, New Orleans, Philadelphia, Phoenix, Salt Lake City, San Antonio, Seattle, St. Louis and Trenton.

- **Domestic violence** was identified by 14 cities as a primary cause of homelessness: Charleston, Chicago, Denver, Miami, Nashville, New Orleans, Philadelphia, Phoenix, Portland, Providence, Salt Lake City, San Antonio, Seattle, and St. Louis.

- **Poverty** was identified by nine cities as main cause of homelessness: Charleston, Los Angeles, Miami, Nashville, New Orleans, Portland, San Antonio, Seattle and St. Louis.

- **Changes and cuts in public assistance programs** were identified by Los Angeles, San Diego and St. Louis as a cause of homelessness.

City Participation in Continuum of Care and Oversight

During the last year, 72 percent of the survey cities report participation in a Continuum of Care and development oversight. City officials were asked to identify the entity who oversees the development of the Continuum of Care in their jurisdictions:

Boston: City Government

Burlington: The Chittenden County Continuum of Care Alliance - a consortium of nonprofits, housing developers, the City and the Burlington Housing Authority.

Charleston: Non-profit

Charlotte: Non-profit

Chicago: The City of Chicago-Department of Human Services and other stakeholders.

Denver: A non-profit called the Metropolitan Denver Homeless Initiative (MDHI). The City and County of Denver participates as one of six counties in the Metropolitan Denver Homeless Initiative. Stakeholders from six Colorado counties and 28 municipalities began working together to plan, develop and implement an integrated homeless Continuum of Care system in March of 1994. The metropolitan Denver area includes the six participating counties of Adams, Arapahoe, Boulder, Denver, Douglas and Jefferson. This collaborative effort resulted in the development of the Metropolitan Denver Homeless Initiative. Over the past five years, MDHI has worked with over four hundred stakeholders to define and develop the seven components of our Continuum of Care system.

Detroit: City government, with input from Nonprofit service providers.

Los Angeles: Los Angeles Homeless Services Authority, a joint powers agency established by the City and County of Los Angeles

Louisville: A non-profit, the Coalition for the Homeless

Miami: Miami-Dade County Homeless Trust

Minneapolis: County

Nashville: The Homeless Coordinator at the Metropolitan Development and Housing Agency (MDHA) the city's public housing agency

New Orleans: UNITY for the Homeless (in collaboration with the City of New Orleans)

Norfolk: Nonprofit

Philadelphia: City Government

Phoenix: Maricopa Association of Governments

Portland: Housing Authority of Portland

Salt Lake City: Salt Lake County Homeless Coordinating Council

San Antonio: City of San Antonio

San Diego: City government

Seattle: City government and County Government

St. Louis: City of St. Louis Department of Human Services/Homeless Services Division

St. Paul: County Government

Trenton: City Government

Impact of Continuum of Care Approach on Homelessness

The city officials were asked to describe the impact of Continuum of Care on homelessness:

Boston: The Continuum of Care approach has been embraced by the community. The inclusive planning has helped create new partnerships and collaborations to help the system work better.

Burlington: Implementation of the Continuum of Care has helped to coordinate efforts and resources among the various nonprofit agencies. Continuum partners meet monthly to discuss challenges and ways to address the growing need for services.

Charleston: The Continuum of Care has been a tremendous force in securing funding, coordinating services, and avoiding needless duplication of efforts. Mayor Riley has been key to the process. His office spearheaded an organization called the Mayor's Council on Homelessness and Affordable Housing which laid the ground work to expand into collaborative relationships with providers in the Tricounty area.

Charlotte: The Continuum of Care has reduction the duplication of services and establishment of a shared database.

Chicago: The Continuum of Care has impacted the provision of services in several ways: 1)The City has partnered with more than 100 Organizations in the city to assess needs, existing services and to develop a strategic plan to end homelessness; 2) Chicago is working with other Continuum in the metropolitan area to jointly sponsor a research project; 3) Continuum activities are fostering a greater level of coordination among service providers and community organizations.

Denver: The Continuum of Care policy created by the Department of Housing and Urban Development has acted as a catalyst in compelling the Denver metropolitan area to develop and implement a comprehensive and coordinated response to dealing with homelessness. As a result of the Continuum of Care policy, the Metropolitan Denver Homeless Initiative has made some significant progress in implementing a coordinated system of housing and service delivery for homeless individuals, families and youth. The fundamental components of our system include:

(1) Outreach to homeless individuals and families to connect them to facilities and services;
(2) Intake and Assessment, Case Management, and Supportive Services are continuing throughout the entire continuum and are available to consumers at all points along the continuum;
(3) Prevention is a key component of the system and includes activities designed to prevent homelessness;
(4) Emergency Shelter and Services necessary for meeting the most basic needs of food, shelter and clothing;
(5) Transitional Housing and Services includes supported housing programs linked with intensive case management and services, which provides an opportunity for homeless persons to become self-sufficient;
(6) Permanent Housing and Services being the ultimate goal of moving homeless persons into affordable housing and, finally,
(7) Maximum Personal Independence Without Reliance on the Homeless System simply illustrates the concept that persons served by participating organizations will successfully graduate from the homeless system.

Detroit: The Continuum of Care approach has led to significantly more cooperation among service providers including collaborations when applying for State Emergency Shelter Grant funding, and federal supportive housing dollars. It has helped to better define existing service gaps so that coordinated efforts may be developed to address them.

Los Angeles: The structure of the continuum has allowed us to delegate resources so that identified gaps in one system are targeted to receive funding.

Louisville: The CoC process requires agencies that had not worked together before to collaborate. It has been the catalyst for developing new community-wide programs that fill gaps

in services as well as reducing issues of turf between agencies. This process has helped meet many of the needs that otherwise would have gone lacking including a mental health outreach team that provides 24 hour/7 day a week coverage to all of the shelters. The downside is the lack of prevention services to keep people in housing. It is the goal of our community not to build more shelters, but to triage people in their housing and there is not funding in the Continuum for this service. It would also be valuable to develop housing plans in institutions that are many times the cause of homelessness. These institutions include prisons, mental health facilities, jails and foster care.

Miami: The City of Miami has benefitted because there is better coordination of services within the Continuum.

Minneapolis: The Continuum of Care has led to increased coordination between project development and joint funding efforts.

Nashville: We now include shelters for the mentally ill. (Park Center)Services are more coordinated among providers. (Renewal House)The Continuum of Care has given Nashville agencies a chance to communicate about and address primary needs together. (Campus)

New Orleans: The Continuum of Care helps to identify gaps in services for homeless persons. As a result, more effective planning has been implemented to fill gaps in services.

Norfolk: The Continuum of Care was developed by the Norfolk Homeless Consortium (a group comprised of homeless service providers, potential providers, non-profits, government representatives and the faith community). The Consortium, worked to blend many different philosophies and approaches into a strategy to continue closing the gaps in services to homeless citizens of our city. This cooperative effort was instrumental in the awarding of 1.6 million dollars of Supportive Housing Grants to non-profit agencies serving the homeless.

Philadelphia: One of the goals of the City of Philadelphia's homeless policy, which is consistent with the federal Continuum of Care, has been to move from the provision of emergency shelter only to the development of a continuum of services for homeless families and individuals that includes homeless prevention assistance, street outreach, shelter, support services, transitional housing and permanent housing. The continuum of care has fostered better coordination of the city's efforts to address homelessness across city agencies, other governmental organizations and private non-profits; this coordination has resulted in an expansion of services at all points on the continuum, improved public private partnerships and an increased level of external financial support.

Phoenix: More local governments and more of the private sector are involved in addressing the barriers which cause people to lose their housing.

Portland: The Continuum of Care process of developing the annual application increases community oversight and participation in service delivery. Additionally, all service delivery systems understand the importance of working together to achieve common and agreed on goals.

Salt Lake City: The Continuum of Care has brought about an improved communication and collaboration within the homeless provider community; presented new ideas such as cohousing; encouraged us to consider and formalize year round planning.

San Antonio: Since its inception in 1982, the San Antonio/Bexar County Continuum of Care has actively addressed issues regarding homelessness in our community. Under the leadership of the City of San Antonio's Department of Community Initiatives' Community Action Division, the Continuum of Care has expanded from its humble beginnings to a membership of over seventy-five agencies representing a wide array of organizations committed to combating and preventing homelessness. The diversity of the Continuum is a crucial component to its success and includes the following representatives of the community: faith-based organizations, homeless and mainstream service providers, private sector, and homeless and formally homeless individuals. The Continuum has steadfastly remained responsive to the housing and service needs of homeless individuals and families by ensuring that the homeless have avenues by which their needs can be met.

A major strength of the Continuum is its constant need to challenge itself. The Continuum provides a forum whereupon agencies convene to discuss the strengths and weaknesses of services available in the community. Through a professional and diplomatic process devoid of divisiveness and rancor, agencies can highlight programs that have been most productive in transitioning individuals toward self-sufficiency and residential stability; on the other hand, the Continuum can also identify programs that need improvements in service delivery and recommend collaboratives with other programs in order to fortify programs that may require such action. Such dialogue enables the Continuum to hone current systems as well as plan for future systems in order to implement a service delivery system that is both effective and efficient. The main goal of the Continuum is to ensure that homeless individuals can move along the Continuum and utilize services in order to re-acclimate homeless individuals back into mainstream society with a sense of dignity and self-respect.

San Diego: The Continuum of Care has made for more successful transition to long-term self-sufficiency.

Seattle: Adopting the Continuum of Care model has strengthened our partnerships with housing and service providers, advocates, homeless people, the private sector, general public, other funders, and other governments, especially King County and more recently the State of Washington. This past year, we have broadened our Continuum of Care planning process to take advantage of several new initiatives and to expand citizen participation in our Continuum of Care. This shift is in addition to numerous on-going and ad hoc planning groups in our community. In this way, we embrace a true community process and reap the benefits of the

unique focus of the various groups, while we curtail duplication of effort and prevent burnout among our community members. Because the staffing of our Continuum of Care process is shared by the City of Seattle and King County, non-profit agencies are relieved of these duties and can concentrate their attention on the substance, not the management of the planning process. The Continuum of Care has made it easier to educate the public about homelessness and to create strong political will to address gaps and meet the needs of increasing requests for shelter and affordable housing.

St. Louis: The Continuum of Care has afforded us an integrated services delivery system which avoids duplication and makes recommendations for programs and services aimed at alleviating homelessness. It has increased our capacity to address barriers to self-sufficiency and assisted us in developing and facilitating partnerships and collaborations.

St. Paul: With the Continuum of Care twenty percent of new construction assisted by the city is affordable to those at 50 percent of the median income and half of that is affordable to those at 30 percent of the median income.

Trenton: The Continuum of Care has allowed the non-profits to play a major role in how the city addresses its homeless population.

Impact of HUD Resources on Homelessness

Boston: The HUD resources have had a tremendous impact in support of innovative services.

Burlington: Burlington's Continuum has experienced deep cuts in funding from HUD's Supportive Housing Program. Beginning in 1997, when the Burlington Homeless Assistance Project was not renewed, and continuing to this day, the Continuum has had to struggle with providing services to an increasing number of homeless persons with diminished federal funding.

Charleston: The Continuum funding opportunities have greatly impacted hundreds of individuals in our community. It has facilitated tighter collaborative efforts resulting in better coordinated services.

Charlotte: HUD resources have helped special populations; Family Jump Start and Substance Abuse.

Chicago: HUD resources have increased/enhanced partnership among agencies. However, the funding share/match requirements have created an unforseen burden on some HUD recipients,

such that they must seek additional funding to meet share requirements. The majority of requests come to local government.

Denver: Since 1996, the Denver metropolitan area has received over $28 million in Continuum of Care funding. This financial support has led to a significant increase in the development of transitional housing and permanent supportive housing to homeless families, individuals and youth. In addition, resources were used to develop and increase case management and supportive services needed to ensure that homeless persons had access to mental health, substance abuse treatment, child care, basic living skills, employment and job training activities needed to become self-sufficient. Unfortunately, as the number of jurisdictions participating in the Continuum of Care approach increased across the country, the amount of funding available to the Denver area has decreased.

As additional jurisdictions develop their Continuum of Care plans, the competition for a limited pot of funding appropriated congressionally each year has resulted in the Denver area losing critical resources needed to support renewal requests for existing programs. The demand for homeless housing and services has significantly outpaced this region's capacity to meet those needs. There are simply not enough resources to meet an annual estimated prevalence of over 16,800 homeless persons per year. Emergency shelters throughout the metropolitan area now have waiting lists and/or conduct lotteries to give away beds at night. Families with children are now being forced to sleep in their cars, in bus stations, and in parks.

In conclusion, the Continuum of Care policy has helped the Denver area to improve the way housing and services are provided to homeless persons. The resources provided by HUD have been instrumental in developing additional housing and services. However, as the need for shelter and services have increased, the amount of funding available nationally has become divided amongst more jurisdictions, decreasing the amount available to continue valuable programs and eliminating the possibility of developing new housing and services for homeless families, individuals and youth.

Detroit: Increased funding from the Supportive Housing Program has resulted in an increase in supportive services, transitional housing and permanent housing, including shelter-plus-care units. The pending development of the area's first Safe Haven is also the result of increased HUD resources.

Los Angeles: HUD resources to the city have decreased in some areas (ESG) and increased only slightly in others (SHP and CDBG). Our heavy SHP renewal burden has made it extremely difficult to expand services to under-served areas of the County of Los Angeles.

Louisville: It has enabled us to build a better service delivery system. It has also been instrumental in maintaining transitional housing units and providing safe havens for the most difficult to engage.

Miami: The impact has been positive, but the lack of resources still remains a problem. Temporary funding to families requiring move in assistance has benefitted this population, but the impact has yet to be measured.

Minneapolis: HUD resources have increased our facilities and stabilized their operation.

Nashville: The Shelter Plus Care program is a great example of what positively can happen with available resources as well as what can happen when resources are not available. Currently at CARES, and in the community, if you are a homeless single male without a disability trying to re-establish yourself after drug or mental health treatment or incarceration, unless you have help from your family, you will have to live on the street for two or more months. In that time, you will have to establish enough income to pay $300-400 for monthly rent and $150-200 for utilities. In addition, you will need $500-750 for deposits alone. With HUD resources like Shelter Plus Care, you have greater access to available low-rent housing at a rate calculated based on your income. A&D services, transportation, case management and other services that assist in establishing and sustaining stability are greatly enhanced and fortified by several HUD programs, but until there are in Nashville enough adequate and affordable housing options, we will continue to see problems. (Nashville CARES)HUD funds have helped address some of the reasons behind homelessness, versus only addressing basic needs. (Campus)

New Orleans: Since 1993 to date, UNITY for the Homeless has applied for and received from the U.S. Department of Housing and Urban Development over $40 million to address the implications of homelessness in New Orleans.

Norfolk: Additional programs and services have been developed in the community to address the need of our homeless population. These programs include the following: Family Development Program, Play Therapy, Transitional Shelters, Day Center, Medication Program, and Permanent Supportive Housing.

Philadelphia: Increased federal funding has allowed for expansion of transitional and permanent housing for homeless families and individuals.

Phoenix: HUD resources have been invaluable in addressing homelessness and have been the major funding source for the countywide Continuum of Care.

Portland: Any increase in resources enables us to serve more people or serve people more deeply.

Salt Lake City: We received no funds last year, but did get very helpful and productive feed back; HUD resources have directly increased the numbers served and who moved out of shelter, allowed early intervention with people on the street, and created stronger case management programs in the community.

San Antonio: HUD resources assist in San Antonio's efforts to further fortify linkages among human service agencies in order to address the needs of homeless individuals and families. HUD has assisted our Continuum through Supportive Housing Program (SHP) funds as well as Emergency Shelter Grant (ESG) funds to provide transitional housing, day care, counseling, job-training, and permanent housing projects for our homeless population.

San Diego: HUD resources are the foundation of homeless service funding.

Seattle: With reduced allocations of HUD funds to Seattle and King County, we are struggling mightily to maintain the current Continuum of Care. Recently, we lost Shelter Plus Care housing units for vulnerable populations and have had to reduce some McKinney-funded supportive services.

St. Louis: The increased HUD resources are pivotal in our ability to provide support services for the homeless such as mental health counseling, childcare, life skills training and job training. HUD resources are at the forefront of our local efforts to provide permanent housing and move toward a "housing first" approach to ending homelessness. In addition, HUD resources and commitment has facilitated additional resources and leveraging necessary to move homeless families to self-sufficiency.

St. Paul: With HUD resources, agencies have remained in service to the homeless and at-risk population.

Trenton: Because of HUD resources, we are able to provide more shelter beds for our homeless youth, the mentally ill and homeless families.

Exemplary Programs

Among the comments from the city officials on an exemplary program or effort underway which prevents or responds to the problems of homelessness:

Boston: Last year Tri City Mental Health opened their Safe Haven for women living on the street with mental illness. The program has been accommodating 6 women in a supportive overnight environment. The program was sited in a church basement with some resistance from the local community. Several weeks ago, the church had an electrical fire upstairs in the sachistry very early in the morning. The women in the program were able to call 911 shortly after the blaze started. There was much fire, smoke, and water damage to the church and the program in the basement. If those women had not been there, it is likely that the church would have been destroyed.

Burlington: The Rental Opportunity Center serves as a clearing-house for information on available apartments in the greater Burlington metropolitan area, as well as a one-stop center for homeless individuals seeking assistance. This program, a HUD Blue Ribbon Best Practice Award winner in 1999, has built a network of over 100 landlords who accept referrals from the program. Last year, the program served 223 families and 271 individuals and achieved some remarkable outcomes:

- It helped 203 families and individuals to find housing.
- It helped 167 families and individuals obtain Section 8 subsidies to make their housing more affordable.

Charleston: Crisis Ministries has been the lead organization in the city of Charleston providing services to the homeless population all in one location since 1987. Through the Homeless Healthcare Grant and other HUD grants for supportive services they have expanded their services to include the implementation of a case management model borrowed from the mental health treatment community. The program is based on the Program for Aggressive Community Treatment or PACT. This has enabled their staff to work more effectively with the population of guests who seek services in their shelter. The PACT team consists of clinicians from the Charleston Center, a county substance abuse agency; the Charleston/Dorchester Mental Health Center, part of the state Department of Mental Health; Goodwill, a non-profit organization providing job services; and Crisis Ministries' staff consisting of a Family Nurse Practitioner, two registered nurses, three masters degree level social workers and two bachelor degree case managers. This team works with front line staff who is referred to as caretakers and who provide day-to-day assistance in the shelters. This method of working insures that all guests are touched by a clinical specialist on a daily basis.

The shelter averages 125 individuals per night and has as many as 190 individuals in a follow up program. Daily sessions are held among staff. The Clinical Team Leader reads from a list of guests and assignments are made directly to the team or for a caretaker based on the needs of each guest. An example of an action item to be completed by a staff member may be to remind "John Doe" of his appointment with the Social Security Office or to be sure "Jane Doe" fulfills her promise to attend AA. This has increased contact with guests and it has provided a sense of investment from each staff member in a guest's journey out of the shelter. The system has only been in place since September so it is too early to tell if it will increase the number of individuals leaving the shelter system for stable housing. One immediate benefit reported by staff is the number of referrals to substance abuse treatment requested and kept.

Charlotte: Family Jump Start - housing and daycare for families.

Chicago: The Chicago Department of Human Services began a collaborative initiative, in the spring of 2000, with the Chicago Transit Authority, the Chicago Department of Public Heath, and the Salvation Army. The program engages and offers services to homeless persons who utilize the public transit elevated trains as overnight shelter. Teams composed of community intervention workers and case managers ride the elevated trains to offer assistance to any

homeless person willing to accept it. Transportation is provided to designated service sites to ensure that a follow-up has been conducted. The Program is designed to provide mobile access to a comprehensive variety of long term supportive services and shelter.

Denver: The Computerized Homeless Information and Referral Project has recently expanded their program to develop a shelter help line to simplify and coordinate access to emergency shelter for homeless persons in the Denver metropolitan area. The shelter helpline provides a single number where homeless persons can call between 8:00 a.m. and 5:00 p.m. Monday through Friday to determine which emergency shelters are appropriate and have space available to meet their individuals needs. In addition to tracking space availability and providing meaningful referrals, the helpline collects basic intake information on individuals calling for assistance in order to begin the process of collecting continuing historical data about the emergency needs of the homeless in the Denver area.

Detroit: All too often the services provided to people who are homeless only work to get them off of the street and into the endless revolving door of the emergency shelter system. These shelters help keep individuals from the harsh outdoors and give them a place to rest, clean-up, and get their heads together to prepare for the process of regaining independence and finding permanent housing. However, their service usually ends once the individual leaves the shelter but this is only the first step in regaining one's independence. Finding a place to live and a job is only the beginning. Sometimes the biggest challenge is trying to maintain housing and employment over an extended period of time. This is where programs like Project Permanency come into play.

Project Permanency is a collaborative effort of six public and private agencies. Wayne County Neighborhood Legal Services (WCNLS) the lead agency, provides intake and assessment services along with United Community Housing Coalition (UCHC). The Legal Aid and Defenders Association provides legal counseling in all areas except criminal concerns, allowing the families representation during personal court proceedings. The Child Care Coordination Council provides assistance in locating child care services with funding to help cover the cost of child care for up to six weeks.

The Traveler's Aid Society and Children's Aid Society (CAS) offer case management (CM) services for families placed in permanent housing by WCNLS and UCHC.The CAS case managers work with families for a six to twelve-month period. The first six months consist of intensive case management. During this time the client and CM work together to achieve agreed upon goals. The next six months are called the inactive or follow-up period, during which the CM spends limited time with the family and primarily monitors their progress. The CAS Project Permanency staff provide intensive individual involvement, emotional support, and guidance. Through home visits, issues such as budgeting, safety concerns, transportation, job and parenting skills, anger management, educational and employment placement are addressed on a case by case basis.

Los Angeles: The efforts underway that responds to homelessness include (1) AB 2034 which provides for mental health services, (2) HUD 811 funds for disabled individuals and their children, and (c) Section 8 housing program which has helped mothers and children to secure affordable permanent housing. However, the passage of Proposition 36 may increase homelessness because of the anticipated need for treatment.

Louisville: The most exemplary program in our community is the collaborative efforts of the Housing Authority of Louisville, the City's Department of Housing, the Coalition for the Homeless, Jefferson County's Department of Human Services and the shelter providers. All of these agencies are working together to make sure that families with the greatest of need are able to get shelter for 30 days in a furnished apartment in a development with intensive case management with two MSW social workers. This program has kept families out of vans and boarded-up houses. It also takes the burden off of the family emergency shelters because they do not have to squeeze in one more family in crisis in an already filled-to-capacity shelter. This has been a perfect example of systems working together for the greater good of the community. These same partners are now working on establishing transitional housing units in other Housing Authority of Louisville developments.

Miami: The Miami Homeless Assistance Program provides outreach to the homeless and near homeless within the City of Miami. They have a toll free number available 24 hours a day. Last year they made 3,603 placements into the Continuum of Care System of Miami-Dade County. The unique approach of hiring formerly homeless individuals providing support services and training them in outreach and assessment skills resulted in over 10,000 documented contacts last year, thereby reaching some of the hardest to serve individuals.

Nashville: The First Response Center of the Metropolitan Interdenominational Church, a provider of services for people with HIV/AIDS, has been able to use their church donations to set up funding for up to three days stay in local hotels for HIV-positive individuals who have emergency housing needs. They then connect to their case management services or to other services in the community. We have been able to refer several of our clients to this service, including a family. (Nashville CARES)Room in the Inn is still a model that needs to be recognized. The only need there would be is an expansion of the program to the full year. (Nashville CARES). Room in the Inn is a seasonal program that provides emergency shelter and meals to homeless individuals and families at area congregations in Nashville. It shelters an average of between 180-200 people each night, from November through March.

New Orleans: January, 1999 marked the opening of a 'safe haven': a facility for unaccompanied women with serious mental illness who have been living on the street. It provides a 24 hour residence with semi-private accommodations. The program has the capacity to house 15 women and is operated by Resources for Human Development. The program design is low-demand with a service strategy focuses on gradually engaging the consumer in the rehabilitative process. It provides all the basic needs in a safe supportive environment. The program offers opportunities for personal growth, and the opportunity to move toward a state of independent living. Services

include mental health counseling, substance abuse counseling, case management and assistance with accessing benefits. The term of stay is unlimited. Some of the staff is made up of formerly homeless persons who work as cooks and in maintenance. The goal of the program is to guide the consumer in the realization that she can live in an accepting, supportive, non-judgmental atmosphere that is preferable to living on the streets. This project filled a gap in services for the hard-to-reach homeless women who are most vulnerable due to their severe mental illness and/or substance abuse problems.

Norfolk: Incorporated in 1911, the YWCA of South Hampton Roads was originally formed in 1893 as "The Girls Home of the City of Norfolk." Throughout its history, the YWCA has provided room, board, educational and physical health activities for women and girls while supporting social change in the workplace and the community. The YWCA continues to work toward fulfillment of its mission to empower women and eliminate racism. The YWCA operates the Women In Crisis Program, a domestic violence program which includes: a 43-bed residential shelter with 24-hour counseling which serves 400 - 500 women and children per year; a 24-hour Hotline- children's program for children residing in the shelter, including art therapy, preschool education and tutoring; ongoing Women's Support Groups with free child care; Barterers Intervention Program through Norfolk and Virginia Beach; Juvenile and Domestic Relations Courts; and extensive community education and collaboration efforts.

Philadelphia: During this past year, the Street Administration completed implementation of a comprehensive plan, developed as past of the Sidewalk Behavior Ordinance, to provide extensive residential and outreach services to chronically homeless individuals, many of whom have been resistant to services in the past. The plan contains several key elements, including an enhanced homeless outreach component and case management capability focusing on chronically homeless individuals. The city has also developed more than 200 new residential placements for chronically homeless individuals as part of the plan, including five new entry level facilities for men and women with substance abuse and/or mental health issues and fifty permanent housing units for formerly homeless individuals ready for the transition to independent living. The plan also contains increased behavioral health supports for individuals with mental health/substance abuse issues who enter the regular shelter system. Since the implementation of the plan, Philadelphia has witnessed a significant reduction in the number of people living on the street.

Phoenix: The City of Phoenix Youth First Project is a collaboration between the City's Human Services Department, the Maricopa Regional School District, Restoration Behavioral Health, and the Governor's Office. City caseworkers, located at the Pappas Schools, provide child-centered intensive case management, individual and group counseling for children and parents. The intent of the program is to decease behaviors which cause involvement with the criminal justice system, increase skills which lead to self-sufficiency, and overcome behavioral health issues.

Portland: Services for homeless youth have recently been through a great deal of change. Agencies serving homeless youth, working with the county and a citizen oversight committee, have crafted a system of services in which each agency brings something critical to the system

and information is shared between agencies on a database. Partly because of this collaborative effort, the system is benefitting from additional outside resource. This includes a one million dollar grant from the Bill and Melinda Gates Foundation for capital costs for a building which will have housing, services, and a medical clinic for homeless youth.

Providence: The Rhode Island Coalition for the homeless has been very motivated in responding to the needs of the homeless in Rhode Island. They have initiated a "Housing Locator Program" and housing training sessions. Each participant completes a training course consisting of landlord/tenant rights, budgeting, housing goals, and future goals. Upon completion, a certificate is issued and a case manager will assist with locating an apartment through a computer list of vacant apartments that have been pre-screened by a Rhode Island Coalition case manager. This is an extremely useful program and all shelters in the state participate in the program and have computers that link to rental housing lists.

Salt Lake City: The Rio Grande SRO was having difficulties until a partnership was formed between Travelers Aid Society and Utah Nonprofit Housing Corporation. TAS instituted 24/7 case management, which has made a tremendous difference in the clients' ability to stabilize their lives.

San Antonio: Operated by the Sisters of the Incarnate Word, the Visitation House provides transitional housing to homeless women and their families. The 90 year old, two-story Victorian structure is both the administrative office and a communal home for the women and their families before moving to a small, quaint, rock structured apartment building next door known as La Posada. At La Posada, seven families live independent and pay $45 a month plus utilities. Most families come from emergency shelters and enter the program to develop skills to acquire residential stability, increase education, increase income, and acquire greater self-determination. Executive Director, Sr. Yolanda Tarango, and staff at the Visitation House don't look at residents as clients but as guests. It's not a 9-to-5 staff-client relationship. Profiles of the women who come to the Visitation House are bleak. Typically, they've had children as teens; they have not graduated from high school; they are domestic-violence victims; they've never lived independently; and they are broke. The Visitation House is a refuge where residents agree to case management in addition to educational and personal growth programs.

San Diego: The city's consortium to provide 150 SRO units and services to homeless mentally ill using 2034 mental health funding is an exemplary program.

Seattle: We are spotlighting a newly opened program, The Urban Rest Stop, which was recently honored with a HUD Best Practices award. With financial support from the City of Seattle, McKinney and other funders, this program is operated by the Low Income Housing Institute. The description that follows was taken from the HUD website on Best Practice awards. The Urban Rest Stop, located in the storefront of the Julie Apartments, offers toilets, showers and laundry facilities to homeless and low-income people at no cost to patrons. The Urban Rest Stop is open weekdays from 5:30 AM to 9:30 PM, and weekends from 8:00 AM to 5:OO PM. These

extended hours, including early morning and evening hours, are specifically designed to assist homeless persons who are working or need to get to a job interview. Two Information and Referral display racks contain various informational flyers and brochures, with subject matter relevant to the patrons of the Urban Rest Stop. Information pertaining to emergency, low-income and transitional housing, access to health services, feeding programs, legal services, job training and employment opportunities is made available in both English and other languages.

St. Louis: An exemplary program is the ANCHORSS Program Alliance of Neighborhood & Community Housing Organization's Resettlement Supportive Services--an innovative permanent housing program designed to bridge the gap between homeless families and landlords by offering support services to the family for up to 2 years, rental costs for 1 year with a 6 month option, child care, client/landlord negotiation and advocacy, job training and employment opportunities. This program will move families to self-sufficiency.

St. Paul: Last year we had so many people living outside that a scaled down program was created to permit people to sleep indoors in a public space on mats. This kept many from suffering damage from the elements. At the same time, the program was supportive enough to encourage those with motivation to take the next step of getting a job and eventually an apartment. The program does a basic intake on the spot and issues a photo ID. The ID assists in reserving a spot from one night to the next. Sober behavior is required. Over 800 people used the program and no one lost fingers or toes to the weather last year.

Trenton: We are opening up a new youth shelter.

City Data on Homelessness

City	Percent Increase in Requests for Emergency Shelter	Percent Increase in Requests by Families for Emergency Shelter	Shelter Beds	Transitional Housing Units	Family Break-up for Shelter?	Family Leave During Day	Percentage Need Unmet	Turn Away Families?	Turn Others Away?
Boston	10	18	same	same	yes	no	0	yes	no
Burlington	4	6	same	same	no	no	10	no	no
Charleston	na	12	same	increased	no	no	0	no	no
Charlotte	30	35	same	same	no	no	6	no	no
Chicago	2	3.1	increased	increased	no	no	1.9	yes	yes
Denver	na	38	increased	same	yes	yes	29.5	yes	yes
Detroit	22	15	increased	increased	no	no	23	no	no
Los Angeles	25	13	same	same	yes	no	36	yes	yes
Louisville	1	-2	same	same	yes	no	20	yes	yes
Miami	5	na	same	same	yes	yes	20	yes	yes
Minneapolis	28	15	increased	same	yes	yes	40	yes	yes
Nashville	15	11	increased	same	no	no	10	no	no
New Orleans	15	25	same	increased	yes	yes	15	yes	yes
Norfolk	6	-17	same	same	no	no	0	yes	yes
Philadelphia	4	7	same	increased	no	no	15	no	no
Phoenix	na	na	decreased	increased	yes	yes	66	yes	yes
Portland	-13	-20	same	same	yes	yes	25	yes	yes
Providence	16	10	increased	increased	yes	yes	35	yes	yes
Salt Lake City	7	6	increased	increased	no	no	34	no	no
San Antonio	47	31	increased	increased	yes	yes	12	yes	no
San Diego	20	15	increased	same	no	no	0	yes	yes
Seattle	0	0	increased	increased	no	no	0	no	no
St. Louis	0.44	na	same	same	yes	yes	29	yes	yes
St. Paul	-9	-17	increased	same	no	yes	5	yes	no
Trenton	25	25	increased	increased	yes	yes	0	yesBost	10

Composition of the Homeless Population

City	Families	Men	Women	Youth	African-American	White	Hispanic	Asian	Native American	Mentally Ill	Substance Abusers	Employed	Veterans	Single Parent Families	Family Members who are Children
Boston	0	0	0	0	38	43	17	1	1	23	35	13	17	94	62
Burlington	37	35	9	19	9	85	3	1	2	40	28	17	15	50	67
Charleston	28	58	14	0	69	26	5	0	0	41	79	67	31	82	33
Charlotte	34	34	26	6	72	23	3	1	1	0	0	0	0	36	39
Chicago	45	40	15	0	79	11	9	0.4	0.3	8.4	38	8.3	0.8	96	68
Denver	49	33	15	3	20	52	20	1	7	24	29	23	14	82	62
Detroit	26	63	7	4	89	7	3	1	0	25	52	0	27	18	80
Los Angeles	16	52	22	10	58	14	23	3	2	20	40	10	33	49	34
Louisville	18	60	16	6	49	47	3	1	1	23	32	21	23	0	11
Miami	23	64	13	0	61	41	23	0.01	0.01	45	69	8	16	77	66
Minneapolis	25	32	17	26	42	30	13	3	12	32	74	35	13	53	36
Nashville	8	71	20	1	55	43	2	0	0	30	70	50	22	60	40
New Orleans	23	54	19	4	68	26	4	1	1	25	39	35	11	90	75
Norfolk	58	31	11	0	89	9.6	1.9	0.3	0.2	0.01	0.01	7.4	0.03	74	67
Philadelphia	61	28	11	0	82	10	4.9	0.2	0	15	35	7.8	7.4	88	71
Phoenix	30	60	5	5	15	51	26	1	8	20	20	30	24	70	80
Portland	41	33	14	12	21	56	18	2	3	20	53	30	20	82	60
Providence	83	12	5	0	23	55	16	1	1	15	25	35	1.4	21	29
Salt Lake City	7	87	5.5	0	13	69	13	1	3.5	15	20	45	19	56	59
San Antonio	21	59	17	3	28	25	40	1	6	29	31	50	32	46	54
San Diego	10	70	15	5	20	55	25	0.02	0.01	50	70	9	30	80	66
Seattle	38	47	14	1	31	38	11	2	6	25	34	29	14	26	25
St. Louis	61	19	19	1	89	11	0	0	0	12	16	33	0	56	83
St. Paul	37	56	7	0	57	29	10	2	3	4	7	29	0	95	65
Trenton	82	11	6	1	85	6	8	1	0	10	20	65	3	87	62

Shelter Beds, Transitional Housing Units, SRO Housing in the Survey Cities

City	Shelter Beds	Family Shelter Beds	Transitional Units	Family Transitional Units	Single Room Occupancy Units
Boston	2190	1516	1412	77	5000
Burlington	74	89	40	10	166
Charleston	262	72	68	8	0
Charlotte	820	150	0	0	0
Chicago	5981	3120	3971	2571	14435
Denver	1038	316	388	148	204
Detroit	2092	543	797	389	234
Los Angeles	2840	943	7292	2383	1308
Louisville	1181	222	632	148	50
Miami	818	235	1151	78	675
Minneapolis	700	300	245	245	1660
Nashville	861	202	324	105	120
New Orleans	783	233	1125	378	579
Norfolk	278	113	15	11	139
Philadelphia	2300	1350	3037	1108	553
Phoenix	1542	843	3576	2086	0
Portland	539	150	776	282	2233
Providence	396	0	220	0	0
Salt Lake City	580	220	339	150	450
San Antonio	672	284	474	466	88
San Diego	550	150	1500	300	900
Seattle	2275	643	1130	355	1139
St. Louis	818	522	716	325	0
St. Paul	336	91	169	87	288
Trenton	201	16	130	130	257

Housing

Assisted Housing Requests

Requests for Assisted Housing by Low-income Families and Individuals

During the last year requests for assisted housing by low-income families and individuals increased in 68 percent of the survey cities, and remained the same in six cities – Louisville, New Orleans, Norfolk. Portland, San Antonio, and St. Louis. The number of requests declined in Los Angeles.

Among the comments from the city officials on the number of requests for assisted housing by low-income families and individuals:

Boston: The requests for assisted housing has increased dramatically as rents continue to rise out of the reach of low-wage workers and elderly and disabled people on fixed incomes. The average two bedroom apartment rents for more than $1400/month and HUD fair market rents are not keeping up with what landlords actually get for rent in Boston.

Burlington: Increased demand is evidenced by the fact that the waiting list has remained at 900 households despite the fact that BHA has received and are utilizing hundreds of new Section 8 vouchers.

Charleston: Charleston has enjoyed an unprecedented growth period over the past five years. Mayor Riley has successfully taken advantage of the historic significance of the architecture of the city and the beauty of the surrounding marshes and harbor to attract tourists. While offering gracious accommodation to visitors, Charleston remains an undeniably livable city for those who are fortunate enough to call it home. Charleston is a city of unhurried grace. Charleston is blessed with a wealth of historic structures that have been transformed into offices, restaurants, stores, and homes. The City's successful intermingling of business, home and garden make Charleston a beloved and very walkable urban landscape experience.

Along with our livability comes development. This fall a large low income housing provider informed their tenants that the buildings were too expensive to maintain, therefore, they were evicting the residents to demolish the buildings in preparation for a new luxury apartment complex. This property had been used as low income housing for 30 years. It happens to be located north of the historical and commercial area of the peninsula on the banks of the Ashley River.

Chicago: Information on requests for assistance are not known at this time, due to the current re-organization at the Chicago Housing Authority. However, it is suspected that the level of requests increased, given Chicago's low vacancy rates and high rent cost. It is expected that the requests for housing are significant.

Denver: Affordable housing continues to be the most urgent need in the Denver-Metropolitan Area.

Los Angeles: Requests for public housing stayed the same. However, requests for Section 8 decreased. In 1999, Section 8 received 6,217 registrations and in 2000 there were 5,464. To date, there are 132,730 registrants waiting for applications.

Louisville: There is no increase in demand for units larger than one bedroom. The trend seems to be for families with children, particularly families moving from welfare to work, to choose market rate housing. The state offers additional incentives to the families to move to home ownership. In late 1999, the Kentucky Cabinet for Families and Children awarded grant funds to the Kentucky Housing Corporation to provide housing support for home ownership to former Kentucky Transitional Assistance Program (K-TAP) recipients and to families participating in the Family Self Sufficiency Program. Conversely, as residents age and begin to live alone, the demand for one-bedroom units increases.

Miami: The Miami-Dade Housing Agency reports that the waiting list for Section 8 voucher/ certificates has reopened for the first time since 1989.

Minneapolis: Several publicly owned units were removed from our inventory.

Nashville: The number of applications for this reporting year (10/01/99-9/30/2000) was 2,365, versus 2,224 for the prior year. This is an increase of 141, or 6 percent. MDHA, the city's housing authority, added two days each week to the days that families could walk in to apply (this year, they may come in Monday to Friday, compared to Tuesday, Wednesday, and Thursday last year).

New Orleans: Section 8 waiting list exhausted. However, there will be an increase when opened again.

Norfolk: The Section 8 waiting list was opened in March of 2000. Three thousand two hundred and twelve requests were added to the waiting list.

Philadelphia: Demand for public housing continues to remain high at a time of decreased resources for subsidized housing.

Portland: This is difficult because many of the waiting lists are closed. However, our experience has been that the numbers have grown substantially in the past.

Providence: Rents in the city increased resulting in lower income families being squeezed out of housing. There has also been an increase in low-income families moving to Providence.

San Diego: We have a five year waiting list for Section 8 certificates and almost no development of affordable/subsidized housing units.

Seattle: Demand for all Seattle Housing Authority programs have increased by more than 20 percent. Section 8 has seen the greatest increase.

St. Paul: Waiting lists get longer for subsidized housing. Buildings that were never full now have waiting lists for the first time in 25 years. Turnover in government assisted units has slowed as options on the open market have dried up

The Wait for Assisted Housing

Forty percent of the cities have stopped accepting applications for at least one assisted housing program due to the excessive length of the waiting list.

Applicants in the survey cities must wait for public housing for an average of 16 months from the time of application until they actually receive assistance. The average wait for Section 8 Certificates is 23 months, for Vouchers 29 months.

- For **public housing** the average wait ranges from 6 in Boston, 12 in Burlington, 12 in Charleston, 36 in Denver, 36 in Los Angeles, 1 in Louisville, 5 in Miami, 24 in Minneapolis, 3 in Nashville, 3 in New Orleans, 8 in Norfolk, 12 in Phoenix, 12 in Portland, 12 in Providence, 24 in Salt Lake City, 4 in San Antonio, 60 in San Diego, 8 in Seattle, 4 in St. Louis, 36 in St. Paul, 24 in Trenton .

- For **Section 8 Certificates** the average wait ranges from 6 in Boston, 18 in Charleston, 24 in Denver, 3 in Louisville, 60 in Miami, 24 in Minneapolis, 24 in Nashville, 3 in New Orleans, 18 in Philadelphia, 48 in Phoenix, 18 in Providence, 28 in Salt Lake City, 60 in San Diego, 24 in Seattle, 10 in St. Louis, 18 in St. Paul, 12 in Trenton .

- For **Section 8 Vouchers** the average wait ranges from 6 in Boston, 12 in Burlington, 24 in Charleston, 24 in Denver, 84 in Los Angeles, 42 in Louisville, 60 in Miami, 24 in Minneapolis, 24 in Nashville, 48 in Norfolk, 48 in Phoenix, 12 in Portland, 18 in Providence, 30 in San Antonio, 24 in Seattle, 10 in St. Louis, 18 in St. Paul, 12 in Trenton .

Among the comments from the city officials on the closing of assisted housing program wait lists:

Boston: The City will only take applications for Section 8 certificates for Priority One status which includes homelessness.

Charleston: Section 8 housing lists are opened periodically for short periods during the year.

Chicago: The City/CHA has discontinued accepting applications for Section 8. However, applications are still being accepted for conventional public housing.

Denver: No, but lists open and close intermittently.

Los Angeles: The average wait varies upon housing preference and eligibility factors. For example, the wait for 1 bedroom is 24 months, 2 bedrooms is 12 months, 3 bedrooms is 36 months, 4 bedrooms is 36 months, and 5 bedrooms is 36 months. Also, on October 1999, the Section 8 Certificates program ended.

Nashville: Registration for section 8 was closed from September 30, 1998 through November 4, 2000. MDHA opened the registration for Section 8 during the first two weeks of November 2000 for working families, elderly and disabled. Vouchers are occasionally issued through special programs only to individuals with disabilities. No more new certificates are being issued through the Shelter Plus Care program.

New Orleans: HANO's Housing Assistance Payment Housing Opportunity Program waiting list has been closed since 1994.

Norfolk: The waiting list for Section 8 is closed. The waiting list for public housing is open.

Portland: Section 8 is closed except for the project based SRO waiting lists.

Providence: The waiting list for section 8 housing is closed, but the public housing waiting list is still open.

San Antonio: The Housing Choice Voucher waiting list has been closed since May of 1999. There are approximately 14,000 families on the waiting list. The Public Housing Program Waiting list is not closed and currently has approximately 4700 families.

Seattle: The Seattle Housing Authority continues to collect applications for housing but then calls people in for follow up interviews when a unit becomes available.

St. Paul: In a sense this is true. Section 8 applications are accepted only one day a month.

People Served Served by Assisted Housing

An average of 29 percent of the eligible low-income households are currently served by assisted housing in the survey cities.

Average Percentage of Income that Low-Income Households are Spending on Housing

Officials in he survey cities estimate that low-income households spend an average of 51 percent of their income on housing.

City Data on Housing

City	Housing Requests	Public Housing Wait (months)	Section 8 Certificates Wait (months)	Section 8 Vouchers Wait (months)	Stopped Accepting Applications	Percent of Need Met
Boston	increased	6	6	6	yes	67
Burlington	increased	12	0	12	no	23
Charleston	increased	12	18	24	yes	0
Charlotte	increased	0	0	0	no	0
Chicago		0	0	0	yes	32
Denver	increased	36	24	24	no	25
Detroit		0	0	0	no	0
Los Angeles	decreased	36	0	84	no	5
Louisville	same	1	3	42	no	33
Miami	increased	5	60	60	no	25
Minneapolis	increased	24	24	24	yes	25
Nashville	increased	3	24	24	no	38
New Orleans	same	3	3	0	yes	0
Norfolk	same	8	0	48	yes	0
Philadelphia	increased	0	18	0	no	24
Phoenix		12	48	48	no	18
Portland	same	12	0	12	yes	0
Providence	increased	12	18	18	no	65
Salt Lake City	increased	24	28	0	no	5.2
San Antonio	same	4	0	30	yes	10
San Diego	increased	60	60	0	no	50
Seattle	increased	8	24	24	no	5
St. Louis	same	4	10	10	no	0
St. Paul	increased	36	18	18	yes	50
Trenton	increased	24	12	12	yes	0

Outlook

Expected Requests for Food and Shelter

Requests for Emergency Food Assistance for 2001

Seventy-one percent of the survey cities expect that requests for emergency food assistance will increase in 2001. Five cities anticipate requests for emergency food assistnce will remain the same: Charleston, Chicago, Minneapolis, New Orleans, and San Diego. Two cities – Burlington and Phoenix – expect a decline in requests.

During 2001 requests for emergency food assistances by families with children **are expected to increase in 65 percent of the survey cities.** Six cities expect no change: Charleston, Chicago, Minneapolis, Nashville, New Orleans, and San Diego. Burlington expects no change.

Among the comments from the city officials on the demand for emergency food assistance:

Boston: The demand for emergency food assistance continues to rise. The number of pantries increase every year and the requests for assistance have increased by as much as 40 percent. With the continued rise in housing costs and too many low paying jobs, we do not see any relief in the near future.

Burlington: The opening of the new downtown supermarket next summer should alleviate some of the emergency food needs in the city.

Chicago: While the demand for emergency food assistance is expected to remain unchanged, every effort will be made by Chicago not-for-profits to expand the food distribution system.

Denver: Many of the persons leaving TANF have obtained employment but they do not make high enough wages to support basic living expenses.

Detroit: The demand for emergency food assistance is expected to increase for both individuals and families simply because of the success of welfare reform and the process for obtaining food stamps has changed. People taking minimum wage jobs and losing assistance will find it extremely difficult to eat. This will be followed by the inability to pay for heating costs. Any slow down in the economy will only increase the problem.

Miami: Due to the high cost of housing, the majority of poor families are using most of their income for rent. Thus, leaving less for food.

New Orleans: This is because of our geographical location adverse weather conditions constantly tend to impact our need for emergency food assistance.

Norfolk: Many public assistance families will be reaching the time limits established by welfare reform and may need additional help from community agencies.

Philadelphia: The demand will continue to increase with the changes in welfare reform; grandparents raising grandchildren; people not receiving a living wage; and drug and alcohol addiction. Many of the families have used their resources (family and friends) and the only place to go is the food cupboard.

Phoenix: Local resources will eventually be tapped-out and demand is expected to increase.

Portland: Those factors which lead Oregon to be the state with the highest percentage of hungry people in the nation have not changed.

Providence: Our demand for food will increase because of a growing low-income population, a continuing increase in rents, lack of affordable housing, and soaring utility rates.

Salt Lake City: We expect an influx of people with the Olympics in 2002 who will need assistance.

San Antonio: Many of the working poor are spending more than half of their income on rent, which minimizes funds for other living expenses. In addition, families must make difficult choices during the time of a crisis and food money is often diverted into emergency expenses such as car repair, health costs, or medication costs. This scenario will continue until more affordable housing is constructed and wages increase among the working poor.

Seattle: Many individuals and families do not have adequate resources to obtain or maintain affordable housing although the economy in Seattle seems to be steady when compared to last year. Emergency food providers may see an increase of demand for emergency food since individual's monthly incomes may be already designated for rent, or other shelter costs, and utilities and other basic needs.

St. Louis: Our expectations are that the demand will increase slightly during 2000.

Forecast of Requests for Emergency Shelter during 2001

Seventy-two percent of the survey cities expect requests for emergency shelter to increase in 2001. Seven cities – Charleston, Minneapolis, Nashville, Norfolk, Phoenix, Portland, and San Diego – anticipate requests for emergency shelter to remain the same.

Seventy-nine percent of the survey cities expect requests for shelter by homeless families to increase during 2001. Five cities expect no change: Minneapolis, Norfolk, Phoenix, Portland and San Diego.

Among the comments from city officials that are expecting requests next year:

Boston: The supply of affordable housing does not meet the demand. The city is spending its own resources on housing and is calling on the state and other cities and towns to do more. As long as the supply of affordable housing continues to decrease and rents continue to increase, we expect the numbers of homeless to increase as well. The Mayor has just committed City operating dollars to renovate our public housing. The federal and state resources are not keeping up with the need.

Burlington: Housing remains at crisis levels. Although new affordable units are coming on line, demand is expected to continue to outpace supply. Average rents for one and two bedroom units in Burlington increased at twice the rate of inflation, while average rents for three bedroom units increase at 4 times the rate of inflation. This trend is not expected to change over the next year.

Charleston: We expect this to be a growing problem because of the lack of employment opportunities for poor single moms with healthcare benefits.

Charlotte: The slowing of the economy and the lack of affordable housing will bring about increased requests.

Chicago: The affordable housing market will play a significant role in the demand for emergency shelter. As rents increase, more families will be at risk of homelessness, and it will be more difficult for homeless persons to transition out of shelters. Effects of the public housing transformation, welfare reform and the impact of the employment market may further impact demand. Discharge of special populations from institutions, such as prison facilities, hospitals, etc. will increase demand for hard to place persons.

Denver: It has increased substantially every year over the last ten years due to Denver's ever-increasing robust economy and the tremendous lack of affordable housing.

Detroit: It is anticipated that overall emergency shelter requests may increase slightly during 2001. A slightly larger percentage increase may be expected for homeless families with children. The impact of time limits for families receiving public assistance to meet the work requirement

of welfare reform will likely result in some of those families becoming homeless.

Los Angeles: With the upcoming welfare cuts and housing costs rising, the increased population seeking these services will rise dramatically.

Miami: Insufficient amount of transitional units will play a role in the demand for emergency shelter.

New Orleans: Public awareness of available resources to families will more than likely lead them to take advantage of emergency resources.

Philadelphia: We expect a slight increase in the demand for shelter beds for singles and families due to the effects of welfare reform and the depletion of Section 8/PHA resources

Phoenix: Resources are not increasing to meet the demand for shelter.

Portland: Although there will continue to be a high turn-away rate, some families may be able to access new faith-based services outside of the metropolitan area. Additionally, it is difficult to capture the total and unduplicated requests for shelter at this time.

Providence: Continued lack of affordable housing, an aging housing stock, and growing substandard housing will increase demand for shelter.

Salt Lake City: We are trying to plan for people coming in connected to the Olympics who have no support or system they can turn to.

San Antonio: A lack of affordable housing coupled with a high poverty rate put working poor families at a higher risk of becoming homeless. A shortage of affordable housing has created an increasing gap between the number of affordable housing units and the number of people needing them. This scenario along with the extensive waiting list for public housing indicates that requests for emergency shelter will increase.

Seattle: In Seattle and King County, there continues to be a critical need for emergency shelter, transitional housing, and affordable permanent housing (for those at or below 30 percent MFI). In spite of our robust economy, many people are not able to reap the economic benefits. We continue to document increasing numbers of employed people in our shelters and transitional housing programs. Even with resources, many of individuals and families simply do not have the resources to obtain and maintain affordable housing in this market.

Moreover, service providers continue to report high rates of domestic violence, which results in people seeking safe shelter and transitional housing, as well as increasing numbers of homeless refugees, especially large families from East Africa. Although attention has been focused on the need to prevent the loss of existing subsidized units (Section 8), maintain the current level of homeless-specific permanent housing units (e.g., assistance under the McKinney Shelter Plus

Care and SRO Mod Rehab programs), and prevent the loss of additional low income housing due to demolition, abandonment, and conversion, we anticipate that some units will be lost next year.

St. Louis: Consistent with past reports, we expect a slight increase in the demand for emergency shelter.

St. Paul: More and more employed are using our emergency shelter system. At times it is a matter of no vacancy. Landlords report 20-40 applicants for every vacancy. Lower income households who have no history of homelessness are at high risk of becoming homeless if they have to move from their present location for any reason whatsoever.

Impact of the Economy on Hunger and Homelessness

The Current Effect of the Economy on Hunger and Homelessness

Among the comments from the city officials on the impact of the strong economy on hunger and homelessness has had:

Boston: The strong economy has increased prices on housing. The rental market is incredibly tight right now and has been this way for several years. Landlords are able to get very high rents and are not looking for tenants with subsidies. The HUD resource is lower than what a landlord can get from other renters. Over one-third of families in shelter have a subsidy but can not secure an apartment. The good economy is hurting the people at the lowest end of the ladder. They are not benefitting. We have many homeless people who are working but can not afford housing. We do not expect this to improve in the near future.

Burlington: Many families are not benefitting from the strong economy. Families working multiple jobs still cannot afford basic needs. Job growth has tightened the housing market, putting housing out of reach for low and moderate income residents. (Recent estimates say that nearly half of Burlington's residents cannot afford the fair market rent for a 2 bedroom apartment.)

Charleston: The impact has been that our strong economy has further widened the gap between those who have wealth at the top and individuals who have been living in poverty for more than one generation.

Charlotte: The Food Stamp rolls have also declined leaving more people to provide for all their food needs on inadequate incomes.

Chicago: The strong economy has allowed renters to charge higher rental rates. Further, the economy has allowed those homeless persons who are easily employed to enter the job market. Yet, despite the strong economy, the number of people who experience hunger and homelessness remains significant. Those who remain unemployed in this economy are likely to have multiple employment barriers, including mental health and substance abuse issues. These homeless persons will need intensive services to resolve their homelessness.

Denver: The impact of our strong economy has been a tremendous lack of affordable housing along with a lack of jobs that pay a living wage.

Detroit: The impact of a strong economy on homelessness includes the availability of more minimum wage employment opportunities as new businesses are developed. Homeless persons who are able to go through employment training are more likely to be able to locate employment upon completion of their training. Also, during a strong economy, persons with increased financial means are more likely to recycle their household items, which may go to homeless service agencies. Likewise, during a strong economy, some people may have more disposable income, which could result in greater donations to service agencies.

Los Angeles: For the last several years, the United States has truly enjoyed a strong economy with low unemployment and inflation. However, the beneficial results of this have not trickled down to the very poor or homeless. One of the reasons is that the poor and homeless do not always have the necessary skills and/or education to take full advantage of the job market. Instead, they obtain low paying jobs with little chance of advancement. Even then their TANF benefits are reduced which forever binds them to poverty. If these benefits were not reduced so quickly they poor would be able to reach some sort of financial stability and would not then fall through the cracks.

Louisville: Low wages and lack of affordable housing has been the result of the strong economy.

Miami: The people that lack employability skills and other support services have remained poor.

Nashville: Unemployment has been low, but minimum wages do affect the people we serve. We are serving families who work but who do not make enough money to support their family. Affordable housing would help. Child care costs for families on minimum wage are too high. (Second Harvest). Because there are so many resources for food, people tend to ask for financial help more than food.(Ladies of Charity). For most people, having a strong economy means good jobs at higher salaries. The homeless individuals we work with must meet the other needs (A&D treatment, educational needs and mental health needs) before they can truly take advantage of what the economy offers. (Campus)

New Orleans: The city is in the midst of an economic recovery that has resulted in a significant

surge in employment opportunities and home ownership. This upswing in the economy continues to benefit the city and continues to stimulate the redevelopment of abandoned and blighted property. The local governing authority has continued to support and fund a variety of programs which target the homeless and diminish hunger ratios.

Norfolk: The economy has been good in our area. The increase in requests by the homeless may reflect the fact that many people are working but at the minimum wage level. A living wage is needed to maintain shelter, food and the basic needs for individuals and families.

Philadelphia: Despite a strong regional economy as well as national economic prosperity, the number of individuals and families seeking food and emergency shelter continues to increase in Philadelphia, as evidenced by these survey results. Thus, it is clear that a significant and increasing proportion of our citizenry is not sharing in the city's economic well being and the disparity between the haves and the have-nots is increasing.

Phoenix: Phoenix has one of the strongest economies in the country, while at least 20 percent of its families remain in poverty. The gap between those who have enough resources and those who don't is expected to increase. The five city of Phoenix Family Services Centers provided emergency assistance to over 27,000 families in Phoenix last year. These are people who do not have enough income to pay their rent, utilities, or buy food, usually because of a crisis.

Portland: Our experience has been that those individuals and families left behind by this current economy are those with the most complicated problems and difficult lives. And, again, even those who are working are not necessarily making a living wage.

Salt Lake City: Utah has a 3 year lifetime limit and is a right to work state. People are leaving welfare, but not for well paying jobs with benefits.

San Antonio: The most immediate effect is the increased number of people working yet not able to meet the basic needs of shelter, food and clothing. It is alarming that the reformation of the welfare system has so stigmatized the use of federal programs i.e. food stamps, health insurance, that more and more people are becoming unwilling to participate in these. It is not enough to reduce welfare roles when large reformed bureaucracies reward the decrease in welfare and food stamp roles as a positive outcome without due consideration for the ability of affected people to maintain a decent standard of living. The economy has had no real trickle down positive effect. Shelters, transitional facilities, soup kitchens continue to report increases in demand yet the spinmasters masterfully label these as unique circumstances and place an emphasis on helping the "deserving poor."

San Diego: Higher incomes has brought increased tax revenues for more social service programs, including food programs.

Seattle: The steady flow of the strong economy in the region has enabled the emergency food system to leverage more in-kind and financial resources from the business sector and other

government entities. The emergency food programs may continue to see an increase in the use of their programs due to the residual effect of welfare legislation, which may impact a family's ability to stretch their monthly budget. The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) continues to receive adequate funding from the state government and this has enabled clients to receive the much needed wellness checks for infants and baby formula, easing the need for local food banks to purchase infant formula, diapers, etc. It is also hoped that funding for Farmer's Market vouchers will increase in 2001 so that women can continue to purchase fresh produce at these venues.

The elderly population in the city of Seattle continues to grow, thus, local congregate meal providers continue to provide this much needed daily source of nutrition and social interaction for the elderly. Faith-based meal programs also continue to do their share of providing food and financial resources to those in need. As in years past, the Summer Food Program in the Department's Division of Family and Youth Services continues to see an increase in the demand for lunch and breakfast sites for those who are under 18 years of age. This can be seen by the increase in site participation throughout the city. While financial support from state and local government is fairly consistent and adequate, food providers will need to continue to leverage more dollars from an array of public and private resources.

Seattle's robust economy continues to be a powerful magnet for job seekers, including refugees and immigrants. With such an increase in population, the demand for market rate as well as subsidized housing has correspondingly skyrocketed. Housing prices (rental and ownership) continue to climb, and there remains a very low rental vacancy rate. Jobs available to people with limited skills are usually in the service industry where wages do not match the cost of living. We have seen a steady increase in the numbers of people in local shelters and transitional housing programs who are employed but simply cannot find affordable housing.

St. Louis: The impact of a strong economy has not trickled down to an increase in the provision of affordable housing, nor has it afforded a livable wage to those at the bottom of the earnings table. The greatest impact lies in the availability of funding to continue providing services to the hungry and the homeless. People are still using the Food Banks and residing in Emergency shelter at astounding rates.

St. Paul: The strong economy has drawn people to our city from all over the world and they have rented and purchased 99 percent of the available housing. Prices have compounded at a 10 percent rate and units are now beyond the means of the lower income households.

Trenton: Some families have not enjoyed the positive effects of a strong economy. We continue to receive a large numbers of requests for food and housing assistance.

Expected Effect of the Economy on Hunger and Homelessness

Among the comments from the city officials on how hunger and homelessness will be affected by the economy during 2001:

Burlington: Without a significant federal commitment to building a substantial number of new and affordable housing units, homelessness will continue to rise.

Charleston: The City of Charleston is running out of affordable space for development on the peninsula. Land is simply too valuable and too desirable for use as affordable housing and this creates a problem because of poor public transportation and the lack of access to healthcare for individuals living on minimum wage service related jobs created by tourism. The following paragraphs are an excerpt from the Inaugural speech given by Mayor Riley at the beginning of this year. It expresses the attitudes of our City government, however, it does not assure our community that our city government has the authority or the resources to provide affordable housing on the peninsula of the city.

"A great city is one that serves as a welcome home for all the citizens, rich and poor, young and old. We must continue to affirmatively and energetically act to make sure that in Charleston this always remains the case. One challenge of success is the pressure of gentrification on our older neighborhoods in the peninsula. People of modest resources have cared for and nurtured these neighborhoods in hard times. Our goal must be that they will continue to be able to live in their neighborhoods in the good times. We are proud of our successful efforts to provide affordable housing for our citizens in a variety of ways. Economic pressures of the time demand that we do more. We are working with a wonderful group of pastors, engaging our religious organizations more fully as a partner in providing affordable housing.

Also, in this time of plenty, we must be even more caring of our hungry and homeless. Our national model, the Interfaith Crisis Ministry, deserves and needs even more community support. Our gentrification strategy must be as good as our preservation strategy. Our citizens deserve no less. Part of the strategy is to make sure that we appropriately prioritize the use of available land for redevelopment. The first priority should be for housing people. The more people who live in a city means that there are more people who love the city. Homes make neighborhoods - Neighborhoods make the city. "

Charlotte: We expect to see more need for emergency food as people continue to be attracted to our strong economy without being aware of the additional cost of living in a large city.

Chicago: The problems are likely to continue to grow, as the services are not available for the most difficult to serve individuals. The situation will increase if the economy and job market begin to decline.

Denver: The same people who have been affected will continue to be affected, only more severely. They range from the elderly to the mentally disabled, to substance abusers, to immigrants, to families, to singles. They are all of these and more, with one common denominator: they are poor.

Detroit: If the economy remains strong, it is expected that there will continue to be additional employment opportunities for minimal skill positions. Training programs will need to be increased so that homeless persons will have more opportunities to become employed in positions which pay more than minimum wage. This would increase the likelihood of their being able to maintain a household.

Los Angeles: Hunger and homelessness will not be affected until more is done by the government or private industry to help the homeless and working poor to better their standard of living and to achieve better paying jobs with accompanying benefits. Hunger and homelessness will not be lessened by an even stronger economy.

Louisville: There is not enough resources to serve people.

Nashville: As our population gets older, we will be serving more seniors, through collaboration and referrals from other senior service providers. As the population ages, we may have fewer volunteers to assist with food distribution. Some people who are getting off welfare are not aware that they may still be eligible for food stamps; these people come to our agency's satellites for assistance. We will always have a percentage of the population that will need food assistance; if the economy worsens, we will need additional help from neighborhoods and churches coming together to address increased demand for food. (Second Harvest) Hopefully the economy will continue to be positive. The people of Nashville are very generous and they will make firm commitments to help those in need. (Ladies of Charity)

While the economy is strong, we need to be very mindful of the economy of many individuals. In this population, employment still often means minimum wages. In that framework, here is the math: 40 hours/week X $5.50/hour X 4.5 weeks/month = $990 month. gross $990 X .15 taxes = $842 month. net Average low-income rent = $350Average low-income utilities payment = $150Remaining monies = $342. $342 is to cover all other costs that these individuals have, which includes, but is not limited to, food, personal hygiene items, home cleaning items, transportation, clothing, telephone and/or access, potential health insurance premiums or co-pays, insurance for their homes/furniture and other costs of living. Three Hundred and Forty Two dollars may be considered enough for an individual living alone, but what is the effect of this income on a family?

Assistance does exists for some if they meet other qualifications which may include disability or having dependent children, but there are many homeless people or people who are at-risk of becoming homeless who do not fit the criteria for assistance, or can get only minimal assistance that does not significantly improve this economic picture. Decreased roles in welfare do not mean that all people are effectively getting into employment that help individuals meet needs or

pay the bills. Many, we know, have gone off the rolls with no personal and/or governmental resources to maintain self-sufficiency. (Nashville CARES)I don't see much of a difference in the coming year unless funding sources are cut, which would limit services provided. (Campus)

New Orleans: The City of New Orleans is dedicated, and will continue to move forward with plans to encourage workforce development training and job development programs for entry level workers. Additionally, the city will continue to support and expand programs which are designed to create home ownership for first time buyers. Consistent improvement in the local economy will greatly enhance job opportunities for workers with minimum or entry level skills. Continued growth in the tourism and convention industry should also yield additional new jobs. In addition, the continued redevelopment of the urban center and the rehabilitation of deteriorating housing stock serves to provide improved living conditions for low income citizens.

Philadelphia: Even if the economy remains strong there will continue to be individuals and families who are left behind and who will rely on the city's emergency food and shelter programs. Also, to date, the impact of welfare reform has not been fully felt. If there is a downturn in the economy and/or the state begins to aggressively implement welfare reform, emergency service utilization could increase dramatically.

Portland: We expect that those individuals and families left behind by the economy will be those with the most complicated problems and difficult lives. And, that many who are working may not be making a living wage.

Salt Lake City: With the Olympics coming in less than one and half years, we are seeing the increase in costs. These may continue in this vein until after the Olympics. Then, no one is sure what will happen to housing or other prices. The Olympics and its fund raising efforts has made it slightly more difficult for nonprofits to raise money.

San Antonio: This city well recognizes the quagmire with which it is confronted: a strong economy, low unemployment yet a high poverty rate, a lack of affordable housing, and high underemployment. The further development of the underclass continues to manifest itself in rendering this portion of the citizenry to a second class existence. It banks utilizing money orders rather than checks made available from high costs "cash it here" establishments with loans available through an increasing number of pawn shops. The increased number of second hand stores makes shopping more affordable than the mainstream mall stores. More and more churches are providing food boxes on a regular basis. If a family needs furniture but cannot buy it, it can rent to own at outrages prices. The second class economy that continues to flourish is a reflection of the disparity that exists between the classes in a boom economy.

San Diego: The increase in tax revenues enables city to expand program resources.

Seattle: Seattle's economy will continue to climb, though probably not as explosively as the past two years. While most people welcome such a robust economy, this continuance will impact hunger and homelessness in serious ways. For example, it is expected that providers will

continue to see a significant increase in requests for emergency food in the year 2001. This biennium budget cycle, emergency food providers did an excellent job in advocating for increases in the food budget. This increase in funding for several food banks, meal programs, and food distribution programs will allow the programs to enhance their current infrastructure, which in turn should allow the programs to receive more food donations. Though part of the increase will help fund transportation services in order to get more food out to the people, the recent passage of state and local legislation may restrict funding for human services, including food/meal and homeless programs.

It is also expected that housing prices will continue to increase and demand for affordable housing will also increase. Tenant-based Section 8 certificate holders report difficulties in finding landlords who are willing to take their certificates or vouchers. And, we will see more employed people receiving assistance through our Continuum of Care. Moreover, many families are currently forced to move out of Seattle to some of the suburban cities where housing is less costly. As a result of this relocation, social networks are fractured, children have to readjust to different schools, and transportation to jobs becomes a major hurdle. It is expected that this trend will continue, impacting these geographic areas that do not have an infrastructure to meet the human services needs of these families. The loss of Section 8 units and other low income housing units due to sale, conversion, and demolition will make matters worse. Additionally, non-profit organizations will be impacted by increasing costs for operating and maintaining their facilities.

Recently, local non-profit housing developers have reported rents/leases, utilities, and other basic costs being raised substantially, thereby eroding or depleting their reserve funds and creating untenable financial situations. In some cases, the organizations were forced to relocate because they could not afford to keep up with the cost of operating their programs in that location, and we anticipate more of this happening in the coming year. Without operating subsidies, organizations will have trouble keeping rents at rates affordable to formerly homeless people with no income or receive SSI and GAU. In terms of developing new housing projects that are affordable to homeless or low-income people, organizations will continue to face stiff completion in purchasing land or facilities. For example, a local non-profit secured funds, including service dollars, for a new 24-unit facility for homeless veterans and has spent the last year trying to acquire a suitable space to develop this much needed project.

As of this report, the organization had still not been successful in their efforts. We will continue to see a significant increase in requests for emergency food, subsidized housing for those at or below 30 percent MFI, and emergency shelter. Even with new resources for homeless families as a result of a lawsuit settlement with the State of Washington coupled with savings due to reduced TANF caseloads, Seattle/King County are not able to meet the needs of homeless people. Of concern to many human service providers and local decision-makers is an electoral change. Recent elections in the city and passage of state initiatives to roll back taxes will force providers to be even more collaborative and creative with their colleagues, other providers, United Way, and other private businesses and foundations for much needed additional funding.

St. Louis: The most significant impact will be in the provision of permanent housing. Through Steward B. McKinney funds, two permanent housing programs will begin to assist homeless families with rent subsidies and support services which will end homelessness for the families participating in these programs. A strong economy can lead to a living wage that will provide an opportunity for families to sustain themselves. What we've seen thus far though is a construction boon in upscale housing and luxury hotels which negatively affects housing for the low income.

St. Paul: More and more people with steady incomes will become homeless until our construction industry can catch up with demand.

Trenton: We feel that we will continue to see an increase in homelessness and hunger.

APPENDICES

Hunger and Homelessness in America's Cities: A Sixteen-Year Comparison of Data

Indicator	1985	1986	1987	1988	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000
HUNGER																
Increase in Demand for Emergency Food	28%	25%	18%	19%	19%	22%	26%	18%	13%	12%	9%	11%	16%	14%	18%	17%
Cities in which Demand for Food Increased	96%	88%	92%	88%	96%	90%	93%	96%	83%	83%	72%	83%	86%	78%	85%	83%
Increase in Demand by Families for Food Assistance	30%	24%	18%	17%	14%	20%	26%	14%	13%	14%	10%	10%	13%	14%	15%	16%
Portion of Those Requesting Food Assistance who are families with Children	NA	NA	67%	62%	61%	75%	68%	68%	67%	64%	63%	62%	58%	61%	58%	62%
Demand for Emergency Food Unmet	17%	23%	18%	15%	17%	14%	17%	21%	16%	15%	18%	18%	19%	21%	21%	13%
Cities in which Food Assistance Facilities must turn people away	67%	55%	67%	62%	73%	86%	79%	68%	68%	73%	59%	50%	71%	47%	54%	46%
Cities which expect demand for Emergency Food to increase next year	88%	84%	84%	85%	89%	100%	100%	89%	100%	81%	96%	96%	92%	96%	84%	71%
HOMELESSNESS																
Increase in Demand for Emergency Shelter	25%	20%	21%	13%	25%	24%	13%	14%	10%	13%	11%	5%	3%	11%	12%	15%
Cities in which Demand increased	88%	96%	96%	93%	89%	80%	89%	88%	81%	80%	63%	71%	59%	72%	69%	76%
Demand for Emergency Shelter Unmet	NA	24%	23%	19%	22%	19%	15%	23%	25%	21%	19%	20%	27%	26%	25%	23%
Cities in which Shelters must turn people away	60%	72%	65%	67%	59%	70%	74%	75%	77%	72%	82%	81%	88%	67%	73%	56%
Cities which expect Demand for Shelter to increase next year	88%	84%	92%	89%	93%	97%	100%	93%	88%	71%	100%	100%	100%	93%	92%	72%
Composition of Homeless Population																
Single Men	60%	56%	49%	49%	46%	51%	50%	55%	43%	48%	46%	45%	47%	45%	43%	44%
Families with Children	27%	28%	33%	34%	36%	34%	35%	32%	34%	39%	36%	38%	36%	38%	36%	36%
Single Women	12%	15%	14%	13%	14%	12%	12%	11%	11%	11%	14%	14%	14%	14%	13%	13%
Unaccompanied Youth	NA	NA	4%	5%	4%	3%	3%	2%	4%	3%	4%	3%	4%	3%	7%	7%
Children	NA	NA	NA	25%	25%	23%	24%	22%	30%	26%	25%	27%	25%	25%	NA	NA
Severely Mentally Ill	33%	29%	23%	25%	25%	28%	29%	28%	27%	26%	23%	24%	27%	24%	19%	22%
Substance Abusers	37%	29%	35%	34%	44%	38%	40%	41%	48%	43%	46%	43%	43%	38%	31%	37%
Employed	NA	19%	22%	23%	24%	24%	18%	17%	18%	19%	20%	18%	17%	22%	21%	26%
Veterans	NA	NA	NA	26%	26%	26%	23%	18%	21%	23%	23%	19%	22%	22%	14%	15%

Population, Poverty and Unemployment Survey Data for Survey Cities				
City	1990 Population	1990 Poverty Rate Estimate	October 1999 Unemployment Rate	October 2000 Unemployment Rate
Boston	574,283.00	18.70%	3.30%	2.60%
Burlington	39,127.00	19.30%	2.10%	2.30%
Charleston	80,414.00	21.60%	3.60%	2.10%
Charlotte	395,934.00	10.80%	2.20%	2.70%
Chicago	2,783,726.00	21.60%	5.40%	4.90%
Denver	467,610.00	17.10%	2.90%	2.60%
Detroit	1,027,974.00	32.40%	6.20%	6.20%
Los Angeles	3,485,398.00	18.90%	6.40%	6.10%
Louisville	269,689.00	22.60%	3.80%	3.30%
Miami	358,548.00	31.20%	8.00%	7.90%
Minneapolis	368,383.00	18.50%	2.80%	2.90%
Nashville	488,374.00	13.40%	3.00%	2.80%
New Orleans	496,938.00	31.60%	5.10%	5.30%
Norfolk	261,229.00	19.30%	5.40%	4.90%
Philadelphia	1,585,577.00	20.30%	6.00%	6.10%
Phoenix	983,403.00	10.50%	3.20%	2.80%
Portland	437,219.00	14.50%	5.10%	5.40%
Providence	160,728.00	23.00%	5.40%	4.80%
Salt Lake City	159,936.00	16.40%	3.50%	3.20%
San Antonio	935,933.00	22.60%	3.60%	3.70%
San Diego	111,549.00	13.40%	3.00%	2.80%
Seattle	516,259.00	12.40%	3.70%	4.00%
St. Louis	396,685.00	24.60%	4.80%	6.20%
St. Paul	272,235.00	16.70%	2.80%	3.00%
Trenton	88,675.00	18.10%	7.60%	6.40%

City_____

STATUS REPORT ON HUNGER AND HOMELESSNESS
INFORMATION QUESTIONNAIRE

Please complete the following survey and return it by NOVEMBER 29, 2000 to:

Eugene T. Lowe
The U.S. Conference of Mayors
1620 Eye Street, N.W.
Washington, D.C. 20006
Fax (202) 293-2352

A report will be published based on the responses to this questionnaire. Experience has shown that such survey reports are effective when they include examples of individual city data. If, however, you want your city's answers to any questions held confidential, please specify those questions by number:_____

NOTE: The year for which information is requested is November 1, 1999 to October 31, 2000. It is referred to as "the last year" in the survey questions. Homeless persons are defined as those who reside in shelters, on the streets, in cars or in other locations not intended as residences.

HUNGER

1. **THE DEMAND**

A) Has the total number of requests for emergency food assistance in your city ___increased, ___decreased, or ___stayed the same during the last year? By what percentage? ____%
Please explain or expand upon your response, and include any other data which supports it.

B) Has the number of families with children requesting emergency food assistance in your city ___increased, ___decreased, or ___stayed the same during the last year? By what percentage? __%
Please explain or expand upon your response and include any other data which supports it.

C) What percentage of those requesting emergency food assistance are members of families with children? __%

D) Has the number of elderly persons requesting emergency food assistance in your city ___increased, ___decreased, or ___stayed the same during the last year? By what percentage? ___%
Please explain or expand upon your response and include any other data which supports it.

E) What percentage of those adults requesting emergency food assistance are employed? ____%

F) What impact has immigration had on your requests for emergency food assistance? Please explain.

2. **THE CAPACITY**

A) Has the number of emergency food assistance facilities in your city ___ increased, ___ decreased or ___stayed the same during the last year? Please explain.

B) Has the level of resources (e.g. funds, volunteers, food, etc.) available to emergency food assistance facilities in your city ____increased, ___decreased, or ___stayed the same during the last year? By what percentage? ___% Please explain.

C) Are emergency food assistance facilities in your city used ___ for emergencies only, ___as a steady source of food for long periods of time, or ___both? Please explain.

D) For those who receive assistance, are emergency food assistance facilities able to provide an adequate quantity of food? ___Yes ___No Please explain.

E) Do emergency food assistance facilities in your city have to decrease the quantity of food provided and/or the number of times families and/or individuals can come to get food? ___Yes ___No Please explain.

If yes, have emergency food assistance facilities had to increase the limit on the number of bags provided and/or decrease the number of times families and/or individuals can come to get food during the last year? ___Yes ___No Please explain.

F) Is the food provided nutritionally balanced? ___Yes ___No Please explain.

3. **THE FUNDING**

During the last year, has your city government spent public funds (either locally generated revenues or federal or state grants) to support local emergency food assistance efforts? ___Yes ___No
If Yes, please check below the funding sources used by your city government and indicate the amount spent.

	Funding Source	Amount Spent
	Locally generated revenues	$
	State grants (not federal pass-through monies)	$
	McKinney homeless assistance programs (please specify which ones on separate sheet)	$
	Community Development Block Grant	$
	Community Services Block Grant	$
	Other federal funds (please specify):	$
		$
		$

4. **THE UNMET NEED**

A) Do emergency food assistance facilities in your city have to turn away people in need because of lack of resources? ___Yes ___No Please explain.

B) Please estimate the percentage of the overall demand for emergency food assistance in your city which goes unmet. ____%
Please estimate the percentage of the demand by families with children for emergency food assistance in your city which goes unmet. ____%
Please explain or expand upon your response, and include any data which supports it.

5. **THE CAUSES**
What are the main causes of hunger in your city?

6. **AN EXEMPLARY RESPONSE**
Please describe briefly an exemplary program or effort underway in your city which prevents or responds to the problems of hunger.
(Please note that your responses will be published in a separate "Best Practices" report. We are interested in learning the following about your exemplary program: Description of Program; When and why created; Measure of Effectiveness; Financing of Program; Linkage to City Government; and Major Lessons. Please limit your response to 3 pages)

HOMELESSNESS

7. THE DEMAND
A) Has the total number of people requesting emergency shelter in your city ___increased, ___decreased, or ___ stayed the same during the last year? By what percentage? ___%
Please explain or expand upon your response, and include any other data which supports it.

B) Has the number of families with children requesting emergency shelter in your city ____increased, ____decreased, or ____ stayed the same during the last year. By what percentage? ___%
Please explain or expand upon your response, and include any other data which supports it.

C) Has the length of time people in your city are homeless _____increased, ____decreased, or ____stayed the same during the last year? Please explain.

D) What is the average length of time that people in your city remain homeless? ____months.

E) What impact has immigration had on your requests for emergency shelter? Please explain.

8.THE PEOPLE
A)Please provide a brief case study (one paragraph) of an **actual** homeless individual or family your city.

B)Please describe the characteristics of your city's homeless population on the following chart:

Homeless Population	Number	Percent
Members of Families with Children		
Single Men		
Single Women		
Unaccompanied Youth (age 18 & under)		
Total		100%
African-American		
White		
Hispanic		
Asian		
Native American		
Total		100%
Mentally Ill		
Substance Abusers		
Persons with AIDS or HIV-related illness		
Employed		
Veterans		

COMMENTS (please explain any significant changes which occurred in the composition of your city's homeless population during the last year):

C)What percentage of the homeless families in your city are headed by single parents? ___%

D)What percentage of the members of homeless families in your city are children? ___%

9.THE CAPACITY

A)Did the number of emergency shelter beds for homeless people in your city ____increase, decrease, or ____stay the same during the last year? By what percentage? ____%
How many shelter beds currently exist in your city for use by homeless people? _____

B) Did the number of emergency shelter beds specifically for homeless families in your city ____increase, ____decrease, or ____stay the same during the last year? By what percentage? ___%
How many shelter beds currently exist in your city for use by homeless families? ____

C) Did the number of transitional housing units in your city ____increase, _____decrease, or ___stay the same during the last year? By what percentage? ____%
How many transitional units currently exist in your city? _____

D) Did the number of transitional housing units specifically for homeless families in your city ___increase, ___decrease, ____ or stay the same during the last year? By what percentage? ___%

How many transitional units specifically for homeless families currently exist in your city? _____

E) Did the number of SRO units or other permanent housing targeted to homeless people in your city ___ increase, ___decrease, ___or stay the same during the last year? By what percentage? ___% How many SRO units currently exist in your city? ___

F) Do homeless families in your city have to break up in order to be accommodated in emergency shelters? ___Yes ___No Please explain.

G) Do homeless families have to leave the shelter in which they are staying during the day? ___Yes ___No If yes, please explain why and tell where they go during the day.

10. **THE FUNDING/RESOURCES**

During the last year, has your city government spent public funds (either locally generated revenues or federal or state grants) to support local shelters or other services specifically for homeless people? ___Yes ___No. If yes, please check below the funding sources used by your city government and indicate the amounts spent.

	Funding Source	Amount Spent
	Locally generated revenues	$
	State grants (not federal pass-through monies)	$
	McKinney homeless assistance programs (please specify which ones on separate sheet)	$
	Community Development Block Grant	$
	Community Services Block Grant	$
	Substance Abuse Block Grant	$
	Mental Health Block Grant	$
	Other federal funds (please specify):	$
		$

Comment:

11. **THE UNMET NEED**

A) Do emergency shelters in your city have to turn away homeless families in need because of lack of resources? ___Yes ___No Please explain, including information on what happens to the homeless families that cannot be accommodated in shelters.

B) Do emergency shelters in your city have to turn away other homeless people in need because of lack of resources? __Yes __No Please explain, including information on what happens to the homeless people who cannot be accommodated in shelters.

C) Please estimate the percentage of requests by all homeless people for emergency shelter in your city which goes unmet. ____% Please explain or expand upon your response, and include any data which supports it.

D) Please estimate the percentage of requests for emergency shelter specifically by homeless families in your city which goes unmet.____% Please explain or expand upon your response, and include any data which supports it.

12. **THE CAUSES**

What are the main causes of homelessness in your city?

13. Is your city part of a Continuum of Care? Who oversees the development of the Continuum of Care in your city (city government, county government, nonprofit)?

14. How has the implementation of the Continuum of Care approach impacted the way your city addresses homelessness? Please explain.

15. What impact have the increased HUD resources for homelessness had on your communities ability to address homelessness? Please explain.

16. **AN EXEMPLARY RESPONSE**
Please describe briefly an exemplary program or effort underway in your city which prevents or responds to the problems of homelessness.

(Please note that your responses will be published in a separate "Best Practices" report. We are interested in learning the following about your exemplary program: Description of Program; When and why created; Measure of Effectiveness; Financing of Program; Linkage to City Government; and Major Lessons. Please limit your response to 3 pages)

HOUSING

17. THE DEMAND
During the last year, did requests for assisted housing by low-income families and individuals in your city ___increase ___decrease or ___stay the same during the last year? Please explain.

18. **THE CAPACITY**

A) Please indicate the average wait in months in your city from the time of application for assisted housing until an applicant actually receives assistance for:
Public Housing _____ months
Section 8 Certificates _____ months
Vouchers _____ months

B) Has your city stopped accepting applications for assisted housing programs due to the excessive length of the waiting lists? ___Yes ___No If yes, please specify the types of housing for which the waiting lists have been closed.

C) Please estimate the percentage of eligible low-income households in your city currently being served by assisted housing. ___% Please explain or expand upon your response and include any data which supports it.

D) Please estimate the average percentage of income that low income households in your city are spending on housing. _____% Please explain or expand upon your response and include any data which supports it.

THE OUTLOOK FOR THE NEXT YEAR

19. THE OUTLOOK

A) Do you expect the demand for emergency food assistance in your city to ____increase, ____decrease, or ____stay the same during 2001?
Do you expect the demand for emergency food assistance specifically by families with children in your city to ____increase, ____decrease, or ____stay the same during 2001?
Please explain.

B) Do you expect requests for emergency shelter in your city to _____increase, ____decrease, or ____stay the same during 2000?
Do you expect requests for emergency shelter specifically by homeless families with children to ____increase, ____decrease, or ____stay the same during 2001?
Please explain.

20. THE IMPACT OF THE ECONOMY ON HUNGER AND HOMELESSNESS

For the last several years the United States has enjoyed a strong economy with low unemployment and inflation. This year we expect a surplus in the federal budget, and welfare caseloads also continue to decline.

A) What has been the impact of the strong economy on hunger and homelessness in your city? Please describe any impact in terms of the people affected and the services provided.

B) How will hunger and homelessness in your city be affected by the economy during 2001? Again, please describe any impact in terms of the people affected and the services provided.

Person completing form:
Name: _____
Title/Agency: _____
Address: _____
Telephone: _____Fax:_____
E-Mail:_____

Survey Cities and Their Mayors

Boston	Thomas Menino
Burlington	Peter A. Clavelle
Charleston	Joseph P. Riley
Charlotte	Pat McCrory
Chicago	Richard M. Daley
Denver	Wellington Webb
Detroit	Dennis Archer
Los Angeles	Richard Riordan
Louisville	David Armstrong
Miami	Joe Carollo
Minneapolis	Sharon Sayles Belton
Nashville	Bill Purcell
New Orleans	Marc Morial
Norfolk	Paul D. Fraim
Philadelphia	John F. Street
Phoenix	Skip Rimsza
Portland	Vera Katz
Providence	Vincent Cianci
Salt Lake City	Ross 'Rocky' Anderson
San Antonio	Howard W. Peak
San Diego	Susan Golding
Seattle	Paul Schell
St. Louis	Clarence Harmon
St. Paul	Norm Coleman
Trenton	Douglas H. Palmer

The United States Conference of Mayors
1620 Eye Street • Washington DC 20006
202-293-7330 • Fax: 202-429-0422